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ABSTRACT

The document provides an introduction and overview of the Handicapped Children's Early Education Program (HCEEP) and abstracts of each of the 208 HCEEP projects. HCEEP has five types of projects: (1) 127 demonstration projects, which provide parents, communities, and professionals with models for early childhood education; (2) 49 outreach projects, designed to encourage replication of the demonstration projects; (3) state implementation grants, which help states plan and coordinate new or expanded early intervention services for handicapped children; (4) four early childhood research institutes, which seek new information; and (5) technical assistance centers, which support the demonstration projects and implementation grant recipients. Abstracts of each of the HCEEP projects are provided as is an index which lists key characteristics. (PHR)

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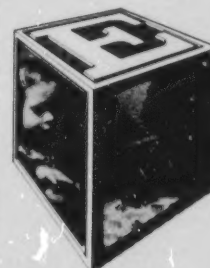
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Handicapped Children's Early Education Program

1979-80 Overview
and Directory

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Preface

This document is a joint effort by the Bureau of Education for the Handicapped (BEH), the Technical Assistance Development System (TADS), and the Western States Technical Assistance Resource (WESTAR) to provide both a directory and an overview of the 208 projects supported by grants and contracts of the Handicapped Children's Early Education Program (HCEEP).

HCEEP has as its purpose the development and implementation of model programs for young handicapped children and their families. To accomplish this mission, five distinct types of projects have been created over the ten years of HCEEP's existence: (a) Demonstration, (b) Outreach, (c) State Implementation Grants, (d) Early Childhood Research Institutes, and (e) Technical Assistance Centers.

The Overview and Directory has four sections:

1. The INTRODUCTION describes the Handicapped Children's Early Education Program.
2. The OVERVIEW summarizes the activities of the five types of HCEEP projects.
3. The ABSTRACTS describe each of the 208 HCEEP projects.
4. The INDEX provides a guide to the

projects' pertinent characteristics (e.g., handicapping conditions of children served, parent activities offered, curricula in use).

By summarizing HCEEP's activities for 1979-80, the Overview and Directory provides BEH with a clear description of the HCEEP network and information for management decisions, dissemination efforts, and reports to those organizations to whom BEH is accountable. Funded projects will find that it enables them to identify others in the field who have expertise that can help them solve problems, as well as demonstrating to those persons and other agencies the massive scope of the effort in which they are participating. The Overview and Directory enables TADS and WESTAR to share information about the projects they serve and to identify resources for the delivery of technical assistance.

Additional purposes of the Overview and Directory are to stimulate interest in the needs of young handicapped children and their families and to provide information to those wanting to deliver services to them. BEH, TADS, and WESTAR hope that readers will find this document useful in their work in the rapidly changing field of early childhood special education.

Introduction

Sandy Hazen
Acting Section Chief
Early Childhood Education
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In 1968 the Congress held hearings which led to the passage of legislation establishing the Handicapped Children's Early Education Program (HCEEP). The hearings pointed to the need for locally-designed ways to serve infants, young children, and their families; to gather more information on effective programs and techniques; and to distribute visible, replicable models throughout the country.

HCEEP began as a small program of 24 demonstration projects. As circumstances in the field changed, HCEEP evolved into an effort with five, major, complementary components (see Figure 1). During 1979-80, BEH funds 208 HCEEP projects.

DEMONSTRATION

At present there are 127 demonstration projects sponsored by private agencies, universities, local schools, State Education Agencies, and other agencies. Demonstration projects feature these components: child identification and assessment, educational/therapeutic programming for children, evaluation of child progress, active parent/family participation, inservice training, coordination with public schools and other agencies, evaluation of project objectives, and demonstration and dissemination of project information. The requirement for interagency coordination has resulted in a

FIGURE 1

HANDICAPPED CHILDREN'S EARLY EDUCATION PROGRAM

PURPOSE: TO ASSIST IN DEVELOPING AND IMPLEMENTING INNOVATIVE EXPERIMENTAL PROGRAMS FOR YOUNG HANDICAPPED CHILDREN (BIRTH TO EIGHT YEARS) AND THEIR FAMILIES

PROJECTS	DEMONSTRATION	OUTREACH	STATE IMPLEMENTATION	EARLY CHILDHOOD INSTITUTES	TECHNICAL ASSISTANCE CENTERS
GOALS	DEVELOPMENT OF EXEMPLARY MODELS; DEMONSTRATION AND DISSEMINATION	STIMULATION OF INCREASED AND HIGH QUALITY SERVICES	IMPLEMENTATION OF EARLY CHILDHOOD STATE PLANS	LONG TERM INVESTIGATION OF SELECTED ASPECTS OF EARLY EDUCATION FOR HANDICAPPED CHILDREN	TECHNICAL ASSISTANCE TO DEMONSTRATION PROJECTS AND STATE IMPLEMENTATION PROJECTS
ACTIVITIES	SERVICES TO CHILDREN SERVICES TO PARENTS STAFF DEVELOPMENT PROGRAM EVALUATION DEMONSTRATION AND DISSEMINATION	BROAD DISSEMINATION OF INFORMATION PRODUCT DEVELOPMENT AND DISTRIBUTION STIMULATING ADDITIONAL SERVICES TRAINING CONSULTATION STATE INVOLVEMENT AND COORDINATION	ASSESSMENT OF NEEDS TRAINING DATA COLLECTION AND ANALYSIS	RESEARCH INTO DIRECT APPLICATION OF EARLY EDUCATION PROGRAMS IN TYPICAL SETTINGS	ASSESSMENT OF NEEDS PROGRAM PLANNING EXPERT CONSULTATION EVALUATION
ELIGIBLE PARTIES	PUBLIC AND PRIVATE, NON-PROFIT AGENCIES	PUBLIC AND PRIVATE, NON-PROFIT AGENCIES	STATE EDUCATION AGENCIES	PUBLIC AND PRIVATE, NON-PROFIT AGENCIES	PUBLIC AND PRIVATE, NON-PROFIT AGENCIES
TYPE OF FUNDING	GRANT	GRANT	GRANT	CONTRACT	CONTRACT
FUNDING PERIOD	3 YEARS, ANNUAL RENEWAL	3 YEARS, ANNUAL RENEWAL	1 YEAR POTENTIAL 1 YEAR RENEWAL	5 YEARS POTENTIAL 5 YEAR RENEWAL	3 YEARS, ANNUAL RENEWAL

great deal of ongoing interaction among many public and private agencies. Programs sponsored by more than one agency have often proven effective. At least eight states have developed active consortia, some of which have undertaken cooperative efforts with State Education Agencies. In recent years, three consortia have been formed, one of projects serving rural areas, another of projects serving infants, and a third comprised of minority individuals in leadership roles.

The continuation and replication rates of projects within the program have been high. A recent study of the first 24 projects funded in 1969 shows that 80 percent are still operating on other funding, as are many replications of those projects. Project progress reports show that more children have left the projects to enter regular placements (some with resource help) than to enter self-contained special education classrooms. Each year for which data have been collected, hundreds of "graduates" have successfully entered programs which either could not take or could not maintain the same children before they received special help in the projects. An evaluation of randomly selected children conducted by the Battelle Center for Improved Education (1976) shows that it was not uncommon for children to have gained one and one-half to two times more than would have been expected in the absence of project experiences. Experience with the program to date has indicated that many capable and hard-working people are involved in early education programs for handicapped children, and that many young children with handicaps are capable of making greater gains in these crucially important early years than their prognoses had anticipated.

TECHNICAL ASSISTANCE

The second component to be developed within HCEEP was technical assistance. The Technical Assistance Development System (TADS) and the Western States Technical Assistance Resource (WESTAR) work with demonstration projects to develop quality programming by helping them meet their objectives and needs. These agencies have pioneered in developing procedures for the systematic delivery of technical assistance, and they are active in information dissemination. They currently work with state implementation grant projects as well as demonstration projects.

OUTREACH

Experience with demonstration projects has revealed that most projects have been able to obtain continuation of direct services to children and families from other sources. Many demonstration projects have been successful at responding to requests from other agencies for help in training staff and/or initiating or improving their services, based on the project's work. To meet such requests, a new HCEEP component, outreach, was developed. Outreach has proven to be a very cost-effective mechanism for stimulating quality services.

As HCEEP moved toward increasing quality control, plans were developed to refine the outreach component. They call for approval of projects for dissemination by the Joint Dissemination Review Panel or other Office of Education approval mechanisms. When revised regulations have been accepted, only approved "model/outreach" projects will be funded to carry out outreach activities to other agencies. The major criterion for approval is evidence of effective educational/therapeutic programming for children. Fifteen HCEEP projects have been approved by JDRP. Eleven JDRP-approved projects are currently funded in HCEEP.

STATE IMPLEMENTATION GRANTS

The next component to be introduced was the state implementation grant (SIG). This component is designed to help a State Education Agency build its capacity to plan for the development and expansion of early intervention services for handicapped children. SIG grants are directed toward assisting states in their attempts to develop long-term, comprehensive, full-service plans for the preschool education of the handicapped. Toward this purpose, SIG grants support such activities as convening of planning groups, disseminating established plans, developing preschool program standards and guidelines, and developing and supporting consortia. These grants provide administrative resources, rather than direct services to children. Progress report data from the SIGs show that they have tremendous potential for making significant state-level changes in a relatively short period of time. Some of the states have produced striking progress, and state systems have changed through this mechanism.

EARLY CHILDHOOD RESEARCH INSTITUTES

Early childhood research institutes, a joint effort with the Research Projects Branch, are the most recent component to be developed in HCEEP. Four institutes are conducting long-term studies to add to the knowledge base on such topics as social, emotional, physical, cognitive, and behavioral aspects of the child; theories and

methods of intervention; parent-child interaction; and assessment approaches.

Projects within these five components of HCEEP are seeking practical solutions to complex problems. Projects are in various stages of model development and service delivery, and they are committed to finding better ways to work with young handicapped children and their families and to share the results of their work with others.

Overview

A Description of Projects Funded under the Handicapped Children's Early Education Program

- At an infant stimulation program in the Bronx, New York, handicapped and nonhandicapped infants and toddlers are playing and learning developmental skills together.
- In Washington, D.C., orthopedically handicapped children ages 3 to 8 are exercising their bodies and exploring their creative potential through participation in improvisational theater.
- On the Pueblo of Acoma, New Mexico, handicapped children from birth to 5 are receiving educational services in Keresan, the Acoma language.

The Bronx, Washington, and Acoma projects are just three of the 208 grantees and contractors throughout the United States supported by the Handicapped Children's Early Education Program. They illustrate the diversity of innovative approaches this federal effort is fostering as models for the education of young handicapped children. Some of the programs, like those described, directly deliver services to children and families. Others provide outreach activities, conduct research, plan statewide programs, or provide technical assistance.

Currently-funded programs were surveyed for this document in order to discern the similarities and shades of difference in the work they do, the environments in which they operate, and the people they serve. All the programs responded, providing information that forms an overview of HCEEP activities during 1979-80.

DEMONSTRATION PROJECTS

Since 1968, HCEEP demonstration projects have been providing parents, communities, and professionals with innovative educational models for the early education of handicapped children. They range in location from rural to inner-city and serve children from diverse social and economic backgrounds. During 1979-80, 35 first-year, 39 second-year, and 53 third-year projects (a total of 127) are serving 3,640 children.

A variety of intervention styles are used to help children with a broad range of handicaps. While some projects focus on a particular type of handicapping condition,

such as hearing impairment, others provide intervention for many types of handicaps.

Table 1 indicates the many handicapping conditions of those served. The children with the most common primary handicapping conditions are speech impaired (18 percent), orthopedically impaired (13 percent), health impaired (12 percent), educable mentally retarded (12 percent), and trainable mentally retarded (11 percent). In addition to their primary handicapping conditions, 25 percent of the children are considered multihandicapped.

Ninety (90) percent of the children served are between birth and age 5 (see Figure 2). Current BEH initiatives to promote services for handicapped infants and young children or those at risk for

TABLE 1
Handicapping Conditions and Ages of Children Served by Demonstration Projects

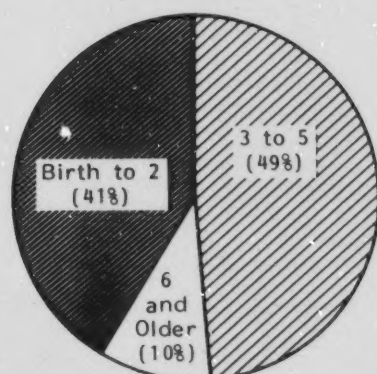
Type of Handicap	Number of Handicapped Served by Age					Total	%
	0-2	3-5	6-9	10-12	13-18		
Trainable mentally retarded	197	171	27	...	...	395	11
Educable mentally retarded	177	211	44	1	...	433	12
Specific learning disabilities	45	194	92	5	...	336	9
Deaf-blind	11	10	...	...	...	21	1
Deaf or hard of hearing	76	59	21	4	...	160	4
Visually handicapped	46	39	7	...	...	92	3
Seriously emotionally disturbed	43	206	28	...	...	277	8
Speech impaired	98	528	37	...	...	663	18
Other health impaired	314	111	13	...	...	438	12
Orthopedically impaired	255	179	49	7	2	492	13
At risk ^a	218	7	...	...	...	225	6
Noncategorical ^a	28	80	...	...	...	108	3
Total	1,508	1,795	318	17	2	3,640	100
Multihandicapped ^b	431	389	71	8	2	901	25

Note. n=127

^a These categories are not included on the standard form used by projects for reporting to BEH. Categories and numbers of children are included here in order to accurately reflect responses to the TADS/WESTAR survey.

^b Multihandicapped children have also been counted in the totals by being listed under their primary handicapping conditions.

FIGURE 2
Ages of Children Served



handicaps and developmental delays are reflected in the large number of children served between birth and age 2--1,508, a 32 percent increase in this population over the 1,142 served in 1978-79. Forty-one (41) percent of the population is aged birth to 2, 49 percent is 3 to 5, and 10 percent is 6 years and older.

Ultimately, HCEEP projects seek to improve opportunities for handicapped children. But part of the HCEEP philosophy has been that families provide important first experiences for their infants and young children and must also be reached if the children are to benefit. The large majority of projects (72 percent) achieve this goal by targeting their direct services at both the parents and child, as can be seen in Table 2. Another 19 percent of projects work

TABLE 2
Primary Targets of Direct Services
by Demonstration Projects

Targets	No. of Projects	Percent
The parents and child	91	72
The child	24	19
Parents (both)	2	2
Other professionals	2	2
The mother/primary caretaker	1	1
Other	7	6

Note. n=127

primarily with the child, and a few work instead with pregnant teenagers, professionals, and other target groups. One new project is designing a curriculum for training pediatric residents in the care of handicapped young children.

Projects involve parents in their programs in a variety of ways in addition to providing direct intervention. Table 3 indicates the types and extent of parent and family involvement activities currently being offered. Those most often mentioned by projects are

TABLE 3
Parent/Family Activities Offered
by Demonstration Projects

Type of Activity	No. of Projects Offering Activity	Percent of Total Projects ^a
Parent/staff conferences	118	93
Participation on the advisory board	117	92
Identification of parental needs and learning goals	113	89
Transition to next placement service	103	81
Home teaching or therapy supervision	96	75
Classroom observation or teaching	95	75
Parent training workshops	95	75
Communication through notes and newsletters	92	72
Maintenance of child progress records	86	68
Social groups	76	60
Opportunities for advocacy	74	58
Counseling groups	69	54
Opportunities for community liaison	58	46
Development of instructional materials	52	41
Support to siblings	47	37
Opportunities to train other parents	32	25
Fund raising	29	23
Provision of respite care	16	13
Other activities	22	17

Note. n=127

^a Column totals more than 100% because respondents could make more than one response.

parent/staff conferences (93 percent) and parent participation on the advisory board (92 percent). Another common activity, offered by 83 percent of the projects, is identification of parental needs and learning goals. Projects also involve parents in the teaching of their own children; provide opportunities for fund raising, advocacy and community liaison; and help with the transition of children to their next educational placements. The respite care offered by 13 percent of projects is a valuable service to families which otherwise might have no appropriate place to leave their handicapped children when they must be away from home.

Though demonstration projects are primarily educational in focus, the agencies which administer them are of several types. As Table 4 indicates, the two most common types of fiscal agencies are local educational agencies and institutions of higher education--27 percent of projects are affiliated with each. However, private, nonprofit organizations sponsor almost as many projects (23 percent). Several projects are part of health institutions, and one Western project is run by an Indian tribe.

The environments in which services are delivered also vary. Table 5 lists the primary service delivery settings of the 127 projects. At least 54 percent are bringing intervention to the child's home: 9 percent are solely home-based programs, and 45 percent combine home intervention with in-facility programs (center, public school classroom, or health center). These data

reflect an emphasis on serving children in their natural environment--the home. Twenty (20) percent of projects are strictly center-based, 13 percent are based in public school classrooms, and 4 percent are based in hospitals or health facilities.

Many delivery settings make it possible for the handicapped children served to learn and play with nonhandicapped peers. Such integration experiences may simply involve conducting special classes in schools primarily attended by normal children. Or, at the other end of the spectrum, they may involve serving handicapped and nonhandicapped young children side by side in day care programs. When projects were asked to categorize the integration experiences they afforded to children, however, one-third of them indicated that the question was inappropriate to their situations. As a large number of projects provide some degree of services in the home, they may have found it difficult to describe their overall programs in terms of the integration statements provided (see Table 6). Nevertheless, over half (51 percent) of the demonstration projects are making some kind of integration possible. Eighteen (18) percent integrate handicapped and nonhandicapped children in regular early education settings, with support services provided either within the setting (12 percent) or outside (6 percent). Another 3 percent bring nonhandicapped children into the special setting. Twenty-three (23) percent serve children in a special setting

TABLE 4
Fiscal Agencies of Demonstration Projects

Type of Agency	No. of Projects	Percent
Local educational agency	34	27
Institution of higher education	34	27
Private, nonprofit organization	29	23
Regional or intermediate educational agency	9	7
Health institution	8	6
State education agency	6	5
Public agency (not educational)	5	4
Other	2	2

Note. n=127

TABLE 5
Service Delivery Settings of Demonstration Projects

Basic Service Setting	No. of Projects	Percent
Home and center (not public school)	32	25
Center (not public school)	26	20
Home and public school classroom	22	17
Public school classroom	17	13
Home	11	9
Hospital or health center	5	4
Home and health center	4	3
Other	10	8

Note. n=127

TABLE 6
Integration Experiences Offered by Demonstration Projects

Types of Integration Experiences	No. of Projects	Percent
Handicapped and nonhandicapped children are fully integrated in a regular early education setting; handicapped children receive support services within that setting.	15	12
Handicapped and nonhandicapped children are integrated in a regular early education setting; handicapped children receive support services outside that setting.	8	6
Handicapped children are served in a special setting, with nonhandicapped children fully integrated into that special setting.	4	3
Handicapped children are served in a special setting and integrated with nonhandicapped children for some activities.	29	23
Handicapped children are served in a special setting in the same facility as nonhandicapped children.	3	7
Other	20	16
Not appropriate to the project.	42	33
<u>Note.</u> n=127		

but integrate them with peers for some activities, and 7 percent serve handicapped young children in a special classroom within a regular facility.

Depending upon both the individual needs of the young child and the model for service delivery being demonstrated, intervention takes many forms. As required by BEH, projects develop an individualized education plan (IEP) for each child that specifies goals, teaching methods, and recommended materials. As the child's needs change, so does the plan, insuring progress in the basic areas of child development. In this survey, projects were asked to choose the particular developmental areas seen as the primary focus for their intervention (see Table 7). For example, 20 percent reported that they give primary emphasis to the development of language-communication skills. Following in order of frequency mentioned are sensorimotor, social-emotional, cognitive-academic, and self-help areas. Despite the forced choice question, one-third of the projects indicated that they focused on all areas of development.

The primary philosophical base of demonstration projects' models spans a continuum from child-directed (experiential) to teacher-directed (behavioral) learning. Table 8 indicates how projects categorized their philosophical approaches when asked to place them along this continuum. Half of the projects aligned themselves with a diagnostic-prescriptive approach. The remaining projects indicated they are either Piagetian (13 percent), or behavioral (12 percent), experiential (6 percent), information processing (3 percent), Montessorian (2 percent), or unspecified in their approach (14 percent, other).

TABLE 7
Primary Developmental Focus of
Intervention of Demonstration Projects

Developmental Areas	No. of Projects	Percent
Language-communication	26	20
Sensorimotor	19	15
Social-emotional	14	11
Cognitive-academic	12	9
Self-help	1	1
All	42	33
Other	13	10

Note. n=127

TABLE 8
Philosophical Approach of Curricula
of Demonstration Projects

Philosophical Approach	No. of Projects	Percent
CHILD DIRECTED		
↑ Experiential	8	6
Montessori	2	2
Piagetian	16	13
Information processing	4	3
Diagnostic-prescriptive	64	50
↓ Behavioral	15	12
TEACHER DIRECTED		
Other	18	14

Note. n=127. Continuum from Harbin, G., *Moderately Handicapped Preschoolers: How Do You Select Assessment Instruments?* In T. Black (Ed.), *Perspectives on Measurement*, TADS, 1977, p. 22.

A wide variety of instruments, both commercial and project-developed, are used to assess child progress. Among the measurement techniques mentioned in the project abstracts are observational checklists, psychological measures, videotape records, self-concept measures, and specific medical examinations. The index contains a list of specific assessment instruments mentioned by projects in the survey. Forty-four (44) different measures were mentioned by name by at least two projects. Ten projects indicated that they are using other project-developed measures. Sixty other instruments were named by a single project, including many that are project-developed. The commercially-available measure most often mentioned was the Bayley Scales of Infant Development, used by 31 percent of the demonstration projects. Other common instruments, each mentioned by about 10 percent of the projects, include the Alpern-Boll Developmental Profile, Bzoch-League Receptive Expressive Emergent Language Scale, Denver Developmental Screening Test, Learning Accomplishment Profile and Learning Accomplishment Profile-Diagnostic Edition, McCarthy Scales for Children, Peabody Picture Vocabulary Test, and Vineland Social Maturity Scale. More information on instrumentation can be obtained from the index (under "Child Assessment Measures") and from the individual project abstracts (under "Measures of Child Progress"). Over one-third of the demonstration

projects specifically indicated that they are using their own project-developed curricula. Many curriculum approaches or packages were mentioned by name by two or more projects, including the Learning Accomplishment Profile (LAP), the Portage Guide to Early Education, and the Teaching Research Curriculum for the Moderately and Severely Handicapped. Numerous other curricula were mentioned by a single project. Refer to the project abstracts and the index for more specific information on the curricula used by the demonstration projects.

OUTREACH PROJECTS

The concept of model programs is carried one step farther by outreach projects. Since they were begun by BEH in 1972, outreach projects have actively encouraged replication of their models and have facilitated provision of high-quality services to handicapped young children and their families by others. All started as demonstration projects and continue providing intervention services (though with non-HCEEP funds), thereby exhibiting the effectiveness of their unique delivery programs. Eleven of the currently-funded outreach projects have been approved as exemplary models by the Joint Dissemination Review Panel (see index). There are 49 outreach projects funded for 1979-80.

As can be seen in Table 9, just as more projects participate in one activity than another, they also allocate varying amounts of staff time to each. One program devotes over 75 percent of its staff time to personnel training, and another project puts the same effort into stimulating sites. However, most projects distribute their time more evenly among their many activities.

An important part of the work of outreach projects is the development of materials that can be made available to others. Some products are designed for working with parents, others for teaching children, and still others for working with the public, administrators, or other professionals. The survey revealed the productivity and innovation of the outreach projects in this area, and the magnitude of the material resources available within the HCEEP network. Table 10 lists the most common types of materials developed by currently-funded projects. Parent education materials and inservice training or staff development materials are the most common (73 percent of projects have developed each). Curricula for children and general awareness materials are next (each developed by 69 percent of projects). Over half of the grantees (55 percent) have bibliographies or other reference materials available, and 20 to 43 percent have developed one of several types of screening and assessment instruments. Refer to the index and project abstracts for specific references to the products available from these projects.

TABLE 9
Staff Time Spent in Outreach Activities

Activities	Proportion of Staff Time, by Number of Projects				Total No. of Projects	% of Projects
	<1/4	1/4-1/2	1/2-3/4	>3/4		
Personnel training	14	29	5	1	49	100
Product development and dissemination	36	10	1	...	47	96
Stimulating sites	31	11	2	1	45	92
Increasing awareness	44	1	...	...	45	92
Stimulating state involvement	39	1	...	...	40	82
Other consultation activities	28	6	...	...	34	69
Other	5	2	...	...	7	14

Note. n=49.

TABLE 10
Project-Developed Materials Available
from Outreach Projects

Type of Material	No. of Projects	Percent
Parent education materials	36	73
Inservice training or staff development materials	36	73
Curricula for children	34	69
General awareness materials	34	69
Program management/evalu- ation materials	31	63
Bibliographies/reference materials	27	55
Observational checklists	24	49
Teacher competencies or needs assessments	21	43
Child progress assessment instruments (3-8)	18	37
Child progress assessment instruments (0-3)	17	35
Curricula for parents	17	35
Child screening instruments (0-3)	10	20
Child screening instruments (3-8)	10	20
Product development guides	6	12
Others	16	33

Note. n=49.

TABLE 11
Fiscal Agencies of Outreach Projects

Type of Agency	No. of Projects	Percent
Institution of higher edu- cation	17	35
Private, nonprofit organi- zation	11	22
Local educational agency	8	16
Regional or intermediate educational agency	3	6
Private, nonprofit organi- zation	3	6
Health institution	3	6
State educational agency	2	4
Public agency (not educa- tional)	2	4

Note. n=49.

As is the case with demonstration projects, outreach projects are administered by a variety of fiscal agencies (see Table 11), the most common of which are institutions of higher education (35 percent). Private, nonprofit organizations (22 percent) and local educational agencies (16 percent) are also common fiscal agencies.

Since it is a stipulation of outreach grants that intervention services to children and families be maintained with non-HCEEP funds, projects must locate alternative sources of continuation support, while the new grant supports outreach activities. As Table 12 indicates, 47 percent of projects receive some level of funding for their services to children and families from local educational agencies and 41 percent from state educational agencies. Other educational agencies, private nonprofit organizations, and private foundations and contributions also support the continuation of intervention services. Just over half of the projects are receiving at least 75 percent of their continuation funding from one source. Other outreach projects are dependent upon a greater mix of support from several agencies.

Characteristics of the educational models developed by the outreach projects are similar to those of current demonstration projects. For instance, the HCEEP concern for parents and families is evident in the thrust of outreach projects' direct services. As Table 13 illustrates, 65 percent of the projects consider the parents and child together to be the primary targets for intervention. Another 18 percent target the child, while the remainder serve primarily parents or "important others" who ultimately help handicapped young children make developmental gains.

The environments for service delivery by outreach models are listed in Table 14. The most common are center-based, home- and center-based, and public school classroom-based (16 percent each). Fourteen (14) percent of the outreach projects provide their intervention services solely in the home, compared to 9 percent of current demonstration projects. However, a total of 38 percent provide some services in the home, versus 54 percent of the 1979-80 demonstration projects that do so.

TABLE 12
Sources of Continuation Funding for Intervention Services (Outreach)

Type of Source	Proportion of Total Funding from Source, by No. of Projects				Total No. of Projects	% of Projects
	<1/4	1/4-1/2	1/2-3/4	>3/4		
Local educational agencies	3	7	3	9	23 ^a	47
State educational agencies	7	5	3	4	20 ^a	41
Public agencies (not educational)	2	1	2	7	13 ^a	26
Private, nonprofit organizations	6	2	...	4	12	24
Federal educational agencies	3	1	1	3	9 ^a	18
Institutions of higher education	1	3	1	2	7	14
Private contributions	5	...	...	...	5	10
Regional or intermediate educational agencies	3	1	...	...	4	8
Private foundations	2	1	...	...	3	6
Other	5	...	...	...	5	10

Note. n=49.

^a One project recorded sources, but not extent of funding from each.

TABLE 13
Primary Targets of Direct Services
Components of Outreach Projects

Targets	No. of Projects	Percent
The parents and child	32	65
The child	9	18
Other professionals	3	6
Parents (both)	2	4
The mother/primary caretaker	1	2
Other	2	4

Note. n=49.

TABLE 14
Service Delivery Settings for Direct
Services Components of Outreach Projects

Basic Service Setting	No. of Projects	Percent
Center (not public school)	8	16
Home and center (not public school)	8	16
Public school classroom	8	16
Home	7	14
Home and public school classroom	4	8
Hospital or health center	3	6
Other	11	22

Note. n=49.

Table 15 indicates the primary developmental thrusts reported by outreach projects for their direct services components. As was true for demonstration projects, the most common approach is to place equal emphasis over all developmental areas. However, 29 percent of the outreach projects report emphasizing language-communication skills, and some stress other developmental areas.

Like the demonstration projects, outreach projects' educational curricula are based on a variety of philosophical approaches. As is seen in Table 16, the most common approach

TABLE 15
Primary Developmental Focus of
Intervention of Outreach Projects

Developmental Areas	No. of Projects	Percent
Language-communication	14	29
Sensorimotor	5	10
Cognitive-academic	3	6
Social-emotional	3	6
Self-help	0	0
All	19	39
Other	5	10

Note. n=49.

TABLE 16
Philosophical Approach of Curricula
of Outreach Models

Philosophical Approach	No. of Projects	Percent
CHILD DIRECTED		
↑ Experiential	4	8
Montessori	0	0
Piagetian	4	8
Information processing	4	8
Diagnostic-prescriptive	20	41
↓ Behavioral	7	14
TEACHER DIRECTED		
Other	10	20

Note. n=49. Continuum from Harbin, G., *Moderately Handicapped Preschoolers: How Do You Select Assessment Instruments?* In T. Black (Ed.), *Perspectives on Measurement*, TADS, 1977, p. 22.

is diagnostic-prescriptive (by 41 percent of the projects), followed at some distance by behavioral (14 percent). The experiential, Piagetian and information processing approaches each are represented by 8 percent of projects.

In keeping with the leadership position of HCEEP outreach projects in the field of early childhood special education, the majority of their curricula are project-developed. The index reports all curricula that were mentioned by name and others that were indicated as "project-developed" but not named in the survey.

For additional information about outreach projects, their activities and products, refer to individual abstracts and the index.

STATE IMPLEMENTATION GRANTS

Early childhood special education programs reflect immense diversity in funding, implementation and ages of children served across all educational systems. The variability in services to handicapped young children poses a tremendous challenge to decision makers. The State Implementation Grant (SIG) program was begun in 1976 to help states plan and coordinate new or expanded early intervention services for handicapped children.

Grants are awarded for two years and are renewable. Table 17 lists the 26 states and territories funded during 1979-80. Some are new to the program. Others have had SIG funding for several years.

The mandates for early childhood special education within the SIG states vary considerably, as they do throughout the nation. For example, Massachusetts provides mandated services to children from 3 to 21 years old and Illinois has mandated services for deaf-blind children from birth, while many states do not provide services for special children under age 8. Information concerning state legislation for special education is included in the SIG abstracts.

The SIGs report that 54 percent of their states have approved rules, regulations, or standards for early childhood special education (ECSE). And 27 percent of the SIG states have approved ECSE guidelines. Statewide tracking of handicapped or at-risk children is reported to be in operation in 19 percent of the SIG states. Eight SIGs (31 percent) report that their states have ECSE

TABLE 17
State Implementation Grants
and Years of HCEEP Funding

Alabama	1	Nevada	1
Alaska	3	New York	4
California	2	North Carolina	4
Colorado	4	Ohio	1
Connecticut	2	Oklahoma	1
Georgia	1	Puerto Rico	1
Illinois	2	South Dakota	3
Indiana	3	Tennessee	2
Kansas	3	Virgin Islands	1
Louisiana	3	Virginia	1
Maine	3	Washington	4
Massachusetts	4	West Virginia	1
Nebraska	4	Wisconsin	4

Note. n=26.

teacher certification standards. See the index for specific states with these characteristics.

SIG activities fall into five broad categories: program development, administration/management/evaluation, personnel development, communication/dissemination, and interagency coordination. They are described briefly.

SIG program development activities lead to new directions in services to children and families. They may involve creating model sites, strengthening existing service programs, or stimulating local educational agencies to provide intervention where there was none before. The screening programs developed by several states fall under this activity category.

The area of administration/management/evaluation incorporates a variety of SIG activities, from developing approaches for better state management of the grant itself to consulting with providers about evaluating child progress. Early childhood data systems, program guidelines and standards, and evaluation and monitoring strategies all have been developed under this area of activity.

SIGs make a substantial investment of resources in personnel development, the training of parents and professionals. Several states have organized and trained parents as advocates and/or service providers for their young handicapped children. Professionals have received training through workshops, institutes, seminars, and graduate-level practicums

provided by many of the SIGs. Of the 26 currently-funded grantees, 73 percent report providing inservice training in early childhood special education. These 19 SIGs have trained over 10,000 professionals during their years of funding.

SIG communication and dissemination activities seek to influence or inform specified audiences regarding early childhood special education issues and information. This work may be carried out with a variety of print and nonprint materials, such as brochures about the needs of handicapped young children, service directories, or training films. Other vehicles for communication and dissemination include statewide conferences and radio-TV promotions. Products developed by and available from the SIGs are mentioned in their project abstracts.

SIGs have developed new approaches to the planning and implementing of cooperative efforts among various state and local agencies that serve young handicapped children. This interagency coordination helps eliminate fragmented service delivery at the local level and provides greater cost-effectiveness. Some reported activities of SIGs in this area have involved developing early childhood special education task forces and advisory committees, as well as service delivery matrices. Of the currently-funded SIGs, 46 percent have facilitated the development of interagency agreements among a variety of agencies, for a total of 58 separate agreements. These agreements involve such service agencies as Maternal and Child Health, Head Start, Developmental Disabilities, local education agencies, and Crippled Children's Services.

For additional information about the 1979-80 SIG projects, refer to SIG abstracts and the index.

EARLY CHILDHOOD RESEARCH INSTITUTES

Funded by BEH in 1977, the four early childhood research institutes are charged with discovering knowledge that can be used to improve services and programs for exceptional young children and their families. All are in the third year of their 5-year contracts with BEH. The primary research efforts of each institute are described briefly. For more information on their activities and accomplishments, refer to the abstracts of the research institutes.

RESEARCH ON EARLY ABILITIES OF CHILDREN WITH HANDICAPS (REACH) University of California - Los Angeles

REACH is seeking to define and explain the variations in competence among handicapped and at-risk children under 6 years old. Infant studies are exploring sustained attention and how to modify it. Studies with preschoolers are investigating aspects of motivation, social development, and temperament, as well as cognitive ability. Other work is evaluating the effects of various intervention strategies on child progress.

KANSAS RESEARCH INSTITUTE FOR THE EARLY EDUCATION OF THE HANDICAPPED University of Kansas - Lawrence

The work of the Kansas Research Institute focuses on developing or improving methods of intervening with children at risk for handicapping conditions. Studies are identifying behavioral clues that indicate intervention is needed and child-family interactions that affect development. Procedures also are being established for assessing and documenting child progress.

EARLY CHILDHOOD RESEARCH INSTITUTE FOR THE STUDY OF EXCEPTIONAL CHILDREN Educational Testing Service - Princeton and Roosevelt Hospital - New York

The efforts at ETS and Roosevelt combine research with service strategies. Researchers are developing intervention techniques for handicapped infants and young children with developmental dysfunction; designing more sensitive assessment tools; documenting differences in the development of normal, at-risk, and handicapped infants; and relating infant development to environmental factors. One longitudinal study is screening low-birth-weight infants at Roosevelt Hospital to detect those at risk.

CAROLINA INSTITUTE FOR RESEARCH ON EARLY EDUCATION FOR THE HANDICAPPED (CIREEH) University of North Carolina - Chapel Hill

The research at CIREEH has four basic directions: (1) development of a curriculum for severely and multiply handicapped infants; (2) comparison of the effectiveness

of intervention programs for children at risk for socially caused mental retardation; (3) development of assessment techniques for accurately measuring developmental progress in moderately, severely, and multiply handicapped young children; and (4) description of the familial and environmental factors thought to affect the early education of handicapped children.

TECHNICAL ASSISTANCE CENTERS

Helping handicapped young children and those at risk is a complex business. The professionals who work with the children and families in the Handicapped Children's Early Education Program need as much moral and technical support as possible. One of the ways BEH provides this support to demonstration projects and state implementation grant recipients is through contracts with two technical assistance agencies.

The Technical Assistance Development System (TADS) serves 71 HCEEP demonstration projects and 14 SIGs in states and territories east of the Mississippi River, except for Illinois, Mississippi, and Wisconsin. It is part of the Frank Porter Graham Child Development Center at the University of North Carolina at Chapel Hill. TADS has been part of the HCEEP network since 1971, originally serving grantees throughout the United States.

The Western States Technical Assistance Resource (WESTAR), funded by BEH in 1977, serves 56 demonstration projects and 12 SIGs west of the Mississippi River and in Illinois, Mississippi, and Wisconsin. A consortium of the University of Washington, the Teaching Research Division of the Oregon State System of Higher Education, and the National Association of State Directors of Special Education, WESTAR is based at the University of Washington in Seattle.

The term "technical assistance" refers to the role that TADS and WESTAR fulfill within the HCEEP network, that of an ongoing and nonevaluative helping resource. They offer a broad range of support services that assist HCEEP grantees in managing their programs and accomplishing their program goals. Through individual on-site consultations, projects receive assistance with the details of program planning and implementation. At small group

workshops and larger group meetings, project personnel are brought together to address common needs and share information on a particular topic. Field visits between projects promote collaboration and the transfer of new practices and products.

The technical assistance agencies also develop materials that address HCEEP needs and concerns. TADS and WESTAR each publish newsletters for the entire HCEEP

network. Other products developed include bibliographies, planning guides, topical papers and monographs, and the HCEEP Overview and Directory.

Though they do not provide direct technical assistance to outreach projects and the early childhood research institutes, TADS and WESTAR do maintain liaison with these agencies and provide assistance to them through their publications.

HCEEP Project Abstracts

Project abstracts are arranged alphabetically by state, city, and project name. A listing of projects and their identification numbers can be found following the abstracts, on page 209.

TARESA HANDICAPPED CHILDREN'S EARLY EDUCATION PROGRAM

FISCAL AGENCY: Top of Alabama Regional Education Service Agency (TARESA)

ADDRESS: 3125 University Drive, Suite 2-C
Huntsville, Alabama 35805

PHONE: 205/533-5955
YEARS OF FUNDING: 3

PROJECT STAFF: Allen Hyatt, Director
4 Teachers, 7 Teacher Aides (VISTA Volunteers), Secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves 46 children (3 to 5 years) representing a variety of handicapping conditions, including motor problems such as cerebral palsy, vision and hearing impairments, speech and language disorders, and mental retardation. Most children served by the program live in rural areas.

PROGRAM FOR CHILDREN:

Daily instruction is provided in a center-based program with speech therapy services available when needed. Teachers make weekly home visits, providing activities based on the Portage Project guidelines.

MEASURES OF CHILD PROGRESS:

Children are pretested in September and posttested in May with the Alpern-Boll and LAP-D. Ongoing assessment is accomplished using the Portage Checklist.

PROGRAM FOR PARENTS:

Parents participate in Advisory Council meetings and parent groups, as well as in weekly home visits and classroom observation. A variety of counseling and information services are available to them through the project.

STAFF DEVELOPMENT:

Staff meetings are conducted every two weeks and regularly include inservice training. Additional staff development comes from participation in workshops, seminars, or conferences presented in the region.

SPECIAL FEATURES OF PROGRAM:

A bookkeeping system manual and videotaped project overview are available for dissemination.

PROJECT TEACH

FISCAL AGENCY: Alaska Crippled Children & Adults

ADDRESS: 1020 Barnette
Fairbanks, Alaska 99701

PHONE: 907/456-2640
YEARS OF FUNDING: 3

PROJECT STAFF: Nancy Hoyt, Director
Developmental Preschool Teacher, Occupational Therapist, Physical Therapist,
Speech Clinician, Preschool Aides

CHARACTERISTICS OF TARGET POPULATION:

The program serves developmentally high-risk children from birth to three years of age, referred by parents or professionals.

PROGRAM FOR CHILDREN:

Two- and 3-year-old children are served in the preschool two to four days per week, or at home on a weekly basis. Children from isolated bush villages are seen in their home once or twice monthly. The Portage-based curriculum is individualized to promote optimal growth in the areas of language, motor, social, self-help, and cognitive development. Children are given complete evaluations at 6-month intervals. Remedial objectives are initially determined by the intensive baseline evaluation.

MEASURES OF CHILD PROGRESS:

The Alpern-Boll is used initially and at 6-month intervals. The Oliver Environmental Language Intervention Program is administered by a speech pathologist.

PROGRAM FOR PARENTS:

Parent training is an essential component of the program. The therapist/teacher's role is to educate the child through the parents. Assessing the development of parents as effective teachers is accomplished (1) indirectly through the child's progress, and (2) directly through the Portage Project method of parent assignments. A parent group has been established to promote communication among parents involved in the project. Parents provide feedback by completing a parent program evaluation.

STAFF DEVELOPMENT:

Staff receives inservice and specialized training as the need and opportunity arise. Weekly meetings bring the staff together to discuss and review individual cases, with emphasis on the team approach.

PROJECT TAKE-OFF

FISCAL AGENCY: Preschool Services, Inc.

ADDRESS: 3421 N. Hayden Road
Scottsdale, Arizona 85251

PHONE: 602/945-3526
YEARS OF FUNDING: 3

PROJECT STAFF: Linda Kopec, Director
2 Teachers, 2 Afternoon Classroom Aides

CHARACTERISTICS OF TARGET POPULATION:

The project serves 12 children, 2 to 7 years old, with mild to moderate handicapping conditions, including visually impaired, hearing impaired, speech impaired, learning disabled, and educably mentally handicapped.

PROGRAM FOR CHILDREN:

These preschoolers are mainstreamed into the regular Palo Alto Preschool classrooms where emphasis is placed on the child's acceptance of the classroom environment, as well as the classroom's acceptance of the handicapped child's presence in that environment. An adapted version of the Palo Alto Preschool Curriculum is being developed in order to provide a more appropriate mode of learning for each handicapped child.

MEASURES OF CHILD PROGRESS:

The DDST is used upon entrance into the program and every six months thereafter. The Palo Alto Preschool Level Goal Statements and Evaluation Cards are used and evaluated bimonthly.

PROGRAM FOR PARENTS:

There are monthly parent/teacher conferences, with both project and Palo Alto teachers involved. Individual counseling sessions with the parent/family coordinator are available. The Parent Handbook for Project TAKE-OFF has been completed. Classroom observations, social groups, and advocacy workshops are also provided. Parents are included on the Advisory Board, along with parents of nonhandicapped children.

STAFF DEVELOPMENT:

Weekly staff meetings are held in order to discuss the program for children and the teacher training activities. A comprehensive teacher training program (for regular Palo Alto staffs) is being implemented by the project teachers and data are being collected on these activities. Staff members also visit other programs and agencies and attend workshops. Weekly meetings between the Palo Alto teacher and the project teacher are held to evaluate the week's activities and plan for the upcoming week. The Palo Alto teacher and the project teacher also collaborate in developing the child's IEP and the necessary adaptations to the curriculum because of each child's individual handicapping condition.

EARLY CHILDHOOD EDUCATION FOR THE SEVERELY/MULTIPLY HANDICAPPED
(ECE-SMH CENTER)

FISCAL AGENCY: Department of Special Education, Arizona State University

ADDRESS: ECE-SMH Center, ASU
Dept. of Special Education
Tempe, Arizona 85281

PHONE: 602/965-3002
YEARS OF FUNDING: 2

PROJECT STAFF: Thomas G. Roberts, Director

2 Teachers, Parent Program Coordinator, Graduate Associate & Assistant to PPC, Physical Therapist, Occupational Therapist, Paraprofessional Aide, Secretary, Language Specialist

CHARACTERISTICS OF TARGET POPULATION:

Twenty severely/profoundly handicapped preschool children (birth to 6 years) participate in a center-based program at ASU. Most children are multiply handicapped and functionally in the lower one-third when compared to their peers.

PROGRAM FOR CHILDREN:

A Basic Skills classroom environment for 3- to 6-year-old SMH children meet at the center five days a week. An Early Intervention (0-3) group meets two days a week at the center for intensive programming and parent training. Periodic visits are also made in the home. Programming is individualized across these areas: motor (gross/fine), perceptual, language, cognitive, and self-help (social). Interdisciplinary assessment involves center staff and Child Evaluation Center at Arizona Children's Hospital. Functional behavior analysis, direct instruction, and behavior modification are emphasized.

MEASURES OF CHILD PROGRESS:

Criterion-referenced and norm-referenced instruments are used to determine child progress. Comprehensive data collection and charting of skill acquisition and maintenance allow for daily and weekly monitoring of child performance. Program effectiveness is determined by summarizing weekly child progress. The DDST, Minnesota Child Development Inventory and REEL are administered as part of routine screening and assessment to determine program eligibility, and at 6-month intervals as measures of global, developmental progress.

PROGRAM FOR PARENTS:

Individualized parent involvement includes instructional sessions at the center and in the home, small group training sessions, classroom observations and participation, conferences, progress notebooks, home visits, parent meetings, task forces, and a "buddy system." Parents of children in the Early intervention Phase are trained to implement their child's program.

STAFF DEVELOPMENT:

Weekly staff meetings are used for project orientation and review and/or case staffings. Staff members visit other programs, attend conferences and workshops, and report back to the total staff. Inservice training is provided by various staff members in their areas of expertise. Consultants are available from the special education faculty. As the result of a needs assessment, each staff member develops an individual contract of goals and specific activities to accomplish those goals.

EDUCATION CENTER FOR HEARING IMPAIRED INFANTS,
PRESCHOOL CHILDREN, AND THEIR PARENTS

FISCAL AGENCY: Tempe School District No. 3

ADDRESS: P.O. Box 27708
Tempe, Arizona 85282

PHONE: 602/967-0636
YEARS OF FUNDING: 1

PROJECT STAFF: Mildred Winemiller, Director; Maxine Turnbull, Coordinator
Clerk/typist

CHARACTERISTICS OF TARGET POPULATION:

As many as 12 children, ages birth to 5 years, and their families receive service through the Center. Children have hearing losses ranging from mild to profound or speech and/or language delays as a result of middle ear pathology.

PROGRAM FOR CHILDREN:

The focus of intervention is on parent education and active participation in the Education Center. Services include: parent guidance and counseling; audiological assessment and management; evaluation and individual therapy for the child; enrollment of 3- to 5-year-olds in a regular preschool; support for the child and the preschool staff; and consultants for psychological and occupational therapy services.

MEASURES OF CHILD PROGRESS:

A variety of instruments are used depending upon the child's age and abilities. Initial evaluation focuses on the child's current level of functioning in receptive and expressive language and overall development. The Koontz Developmental Program, Preschool Language Scale, Communicative Evaluation Chart, and biannual videotapes of the child and parent contribute to the record of progress.

PROGRAM FOR PARENTS:

Parents participate in the development of an education plan for their child; are included in the therapy sessions and guided in working with their child; attend individual counseling sessions and group meetings; participate as aides in the preschool; attend an ongoing parent education program; and serve as members of the Advisory Council.

STAFF DEVELOPMENT:

Inservice training sessions are designed to provide the personnel of the project and preschool(s) with information about hearing loss and strategies for intervention, with the goal of successful integration for the hearing impaired child.

SPECIAL FEATURES OF PROGRAM:

The project emphasizes the family's role in the education of the hearing impaired child, uses hearing children as models for language and communication at the preschool level, and uses the auditory-oral approach to communication with special attention on the development of an auditory function.

PROGRAM FOR UNSERVED HANDICAPPED CHILDREN IN SOLANO COUNTY

FISCAL AGENCY: Office of the Solano County Superintendent of Schools

ADDRESS: 655 Washington Street
Fairfield, California 94533

PHONE: 707/429-6418
YEARS OF FUNDING: 2

PROJECT STAFF: Bonnie Ann Plummer, Director
Infant Health Practitioner, Infant Specialists, Audiologist, Psychologist,
Speech Therapist, Teacher's Aide

CHARACTERISTICS OF TARGET POPULATION:

Children (birth to 3 years) with a high probability of developmental disabilities, including physical handicaps, mental retardation, and other handicapping conditions are identified, assessed, and provided with a remedial program. Newborns referred from local hospitals and young identified handicapped children are eligible for services.

PROGRAM FOR CHILDREN:

Home- and hospital-based programming is provided to all identified infants to 18 months of age. For children over 18 months of age, a combination home- and center-based program is provided. The intervention is concentrated on five target areas: gross motor, fine motor, language, social, and self-help. Specific sensory stimulation and educational activities based on the children's assessed needs are provided.

MEASURES OF CHILD PROGRESS:

The Bayley and the Early Intervention Development Profile are used as pre-tests every six months as indicators of child progress. Supplementary diagnostic tests include: the Albert Einstein Scales of Sensory Motor Intelligence, REEL, Sequenced Inventory of Language Development, and the Leiter. A goal scaling procedure is used to evaluate the child's weekly performance.

PROGRAM FOR PARENTS:

Parents participate in the governing of the project, assist in the dissemination of program information, and function as advocates for their children. Each parent is assessed on the Parental Behavior Progression Scale. Through modeling by staff, parents learn methods of presenting appropriate activities to their child. Parent training is conducted on a one-to-one basis in the home and during conferences between parents and staff. Group activities and meetings regarding pertinent topics are scheduled.

STAFF DEVELOPMENT:

Staff training includes: initial orientation on the project's purposes and operational procedures; instructional workshops in specific skill areas (i.e., test administration, diagnostic procedures, teaching strategies); and informal training on solving operational problems related to the implementation of the project. Weekly staff meetings are conducted for case and project review.

SPECIAL FEATURES OF PROGRAM:

Special features of the project include: (1) a regional public school agency provides direct services to infants in hospitals; (2) a discrepancy evaluation design to compare parent and staff perception of parenting behavior in the home; (3) development of a standardized evaluation procedure using control and experimental groups to evaluate the results of programs for high-risk infants; and (4) comprehensive child-find procedures for infants.

INFANT/PARENT EDUCATION PROJECT

FISCAL AGENCY: Charles R. Drew Postgraduate Medical School

ADDRESS: 12021 Wilmington Avenue
Los Angeles, California 90059

PHONE: 213/603-4661
YEARS OF FUNDING: 3

PROJECT STAFF: Vivian Weinstein, Director; Torcy Wiley, Coordinator
Infant/Family Worker, Occupational Therapist, 2 Community Workers

CHARACTERISTICS OF TARGET POPULATION:

The program serves 50 infants, birth to 1½ years, with these handicapping conditions: slow development, prematurity, genetic problems obvious from birth, suspected sensory loss or impairment, latent or active convulsive states, cerebral palsy, and other physical handicaps. The children and families are residents of the Southeast Health Services Region of Los Angeles County, an inner-city minority community. The program serves a black and Hispanic low socioeconomic population.

PROGRAM FOR CHILDREN:

The program, based primarily in the child's home, focuses on demonstrating appropriate activities to the parents for implementation with the child. The curriculum includes seven areas of development: (1) feeding and toileting, (2) gross motor, (3) fine motor, (4) perceptual-motor, (5) language, (6) personal-social, (7) physical maintenance. The learning environment is designed to be as natural as possible, with modifications to allow the infant to "make something happen" rather than being passively manipulated.

MEASURES OF CHILD PROGRESS:

The DDST and Michigan Developmental Schedules are used with all children in the program. When appropriate, the Fiorentino Reflex Evaluation is used. The instruments are used when an infant is enrolled, every three to four months, and upon termination from the program.

PROGRAM FOR PARENTS:

The activities for parents are designed to increase their knowledge, awareness, confidence and ability to meet the child's needs and to encourage active advocacy for the services required by the child. The staff provides support and assistance through individual counseling and group activity. Parents have the opportunity to increase their mothering skills, as well as specialized skills required for their own child.

STAFF DEVELOPMENT:

Inservice training includes: (1) orientation for new staff members, (2) weekly staff meetings, (3) ongoing training in community resources and their utilization, (4) bimonthly multidisciplinary Family Review Conferences, (5) bimonthly seminars conducted by outside experts, (6) ongoing discussion and training in Ecological Model Development, and (7) release time for junior staff members (3 hours weekly) to attend classes.

SPECIAL FEATURES OF PROGRAM:

The project is exploring strategies for increasing responsiveness to the cultural and social needs of families and for further development of the ecological model.

UCLA INTERVENTION PROGRAM

FISCAL AGENCY: University of California at Los Angeles

ADDRESS: Rehab. Center, Rm. 23-33
1000 Veteran Avenue
Los Angeles, California 90024

PHONE: 213/825-4821
YEARS OF FUNDING: 2

PROJECT STAFF: Judy Howard, Director; Eleanor M. Baxter, Coordinator
Parent-Infant Educators, Physical Therapist, Occupational Therapist, Language Development Specialist, Social Worker, Research Coordinator

CHARACTERISTICS OF TARGET POPULATION:

The project serves developmentally handicapped infants and children (birth to 3) in an integrated program with nonhandicapped children. Handicapping conditions include cerebral palsy, developmental delays, emotional disturbance, chromosomal disabilities, and other neurological handicaps.

PROGRAM FOR CHILDREN:

Three center-based programs include: (1) infants to 9 months and their primary caregivers meet once weekly with teacher and therapist (OT, PT); (2) infants, 9 to 18 months, and a nonhandicapped infant meet one to three afternoons per week with an educator, PT, OT and language specialist; (3) handicapped and nonhandicapped toddlers 1½ to 3 years developmental age meet two to five mornings per week with educators, OT, PT, and a language development specialist. Entry medical services include initial pediatric history, a physical and neurological exam, a developmental exam, visual screening and audiological testing. The developmental exam is repeated every six months. Therapeutic interventions are incorporated into play programs whenever possible.

MEASURES OF CHILD PROGRESS:

The Gesell is used every six months. A language history and evaluation are made at entrance. Every six months, the child is videotaped with a select set of toys as a nonstandardized observation of spontaneous play behavior. Daily observations, used for planning IEPs, focus on play, language, sensorimotor, social, affect, autonomy, and self-care.

PROGRAM FOR PARENTS:

Parents of infants participate at all times. Parents of toddlers participate in guided observations and directly in the classroom. A social worker is available for weekly group meetings and individual consultation. Parents participate in the pool play program, newsletter preparation, fund raising activities, Advisory Board, evening meetings, and IEP development. Parents are offered options based upon their individual needs, priorities, and strengths.

STAFF DEVELOPMENT:

Staff are involved in weekly inservice meetings and workshops, visiting other programs, attending professional meetings and seminars. During a week of inservice at the beginning of each year, staff is encouraged to assess individual professional needs and to plan related inservice activities.

INFANT "CARE" PROGRAM

FISCAL AGENCY: Merced County Department of Education

ADDRESS: 632 West 13th Street
Merced, California 95340

PHONE: 209/723-2031
YEARS OF FUNDING: 3

PROJECT STAFF: Katherine Sherlock, Director; Gaye Carskaddon-Riggs, Coordinator; Head Teacher

CHARACTERISTICS OF TARGET POPULATION:

Twenty-nine children (birth to 3) who are developmentally delayed, handicapped, high-risk, or abused participate with their parents. All services and programs are offered on a bilingual (English/Spanish) basis.

PROGRAM FOR CHILDREN:

Both home-based and center-based approaches are employed. The center-based program provides an optimal environment to facilitate all areas of development through an eclectic approach. Integral philosophical components are the concepts of consistency and regularity in the environment, reinforcement of the child's positive functioning, stimulation appropriate for each child, and ongoing assessment. Option of center-base, home-base, or combination thereof is individualized. During the regular school year, approximately 85 percent are center-based; during summer, all are home-based.

MEASURES OF CHILD PROGRESS:

The Bayley is administered upon entrance, annually based upon entrance date, and upon leaving program. The Denver Developmental Screening Profile is given upon entrance and at 3-month intervals thereafter. The Vineland is given upon entrance and annually thereafter.

PROGRAM FOR PARENTS:

In the home approach, weekly visits focus on parent-infant interaction and the training of the parent in intervention techniques relating to cognitive, affective, and motor domains. Bromwich's Parent Behavior Progression is used to assess the program's effectiveness with parents. The parent group meets twice weekly: once for parent education and socialization, the other for group sharing led by a psychiatric social worker. Parent advocacy is taught. Four potlucks are held annually.

STAFF DEVELOPMENT:

Infant Care staff participates in CSULA classes on early childhood/handicapped, University of California extension classes, site visitations, WESTAR technical training, Central Valley Regional Center's nutritional training, special project nutritional education, and interfacing with other agencies. Video training films will be produced this year. An early childhood/handicapped conference is planned for spring, 1980. ICP will make presentations at two conferences in the spring of 1980.

SPECIAL FEATURES OF PROGRAM:

The project has a bilingual delivery system (Spanish-English); 14 percent of enrollment are Child Protective Services referrals; parent education and advocacy training is provided; children are served regardless of proximity to center; and children are served on a center and/or home basis.

PARENT-INFANT PROJECT

FISCAL AGENCY: Children's Hospital Medical Center

ADDRESS: 758 Kingston, #106
Oakland, California 94611

PHONE: 415/655-9521
YEARS OF FUNDING: 3

PROJECT STAFF: Nancy Sweet, Director
Pediatrician, Psychologist, Preschool Coordinator, 3 Parent Educators,
Secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves 24 infants and their families. Infants are under a year old at program entry, with a variety of handicapping conditions. Parents and other family members are significant participants in the program.

PROGRAM FOR CHILDREN:

Infants are seen weekly in the home by a Parent Educator. Individual programs are designed every 12 weeks and revised weekly. Infants participate in monthly infant groups as part of the Family Workshop series and in weekly infant education activities as part of the Parent-Infant Education Group. Supplementary services are provided by project consultants, other hospital departments and community agencies.

MEASURES OF CHILD PROGRESS:

Assessments are completed at entry and 6-month intervals thereafter with the Bayley, Infant Behavior Profile, and Infant Language Inventory. A pediatric examination is also completed at these intervals. The Infant LAP provides an ongoing record of developmental progress.

PROGRAM FOR PARENTS:

Parents are primary participants in the program. Teaching and coping goals and accomplishments are individually identified with the Family Adaptation Profile, Parental Behavior Progression, Maternal Attachment Scale and Home Inventory for Infants. All aspects of the program, including home services, individual counseling, Family Workshops and Parent-Infant Education Groups, are planned to help parents be developmental therapists for handicapped infants.

STAFF DEVELOPMENT:

The program has identified and developed a new professional role of Parent Educator, who provides both educational and emotional support for the families of disabled infants. A self-assessment scale identifies 20 competencies needed for this role, which provide a basis for individualized preservice and inservice training. Ongoing multidisciplinary support is provided through weekly case conferences and staff meetings.

SPECIAL FEATURES OF PROGRAM:

The hospital-based program collaborates with a mainstreamed preschool program at Circle Preschool in providing its group activities. The program also meets some of the needs of siblings of disabled infants through involvement and special activities in the home program and family workshops.

FULL POTENTIAL PROGRAM

FISCAL AGENCY: Contra Costa County Superintendent of Schools

ADDRESS: Peres Elementary School, Rm. 2
719 Fifth Street
Richmond, California 94801

PHONE: 415/232-7339
YEARS OF FUNDING: 3

PROJECT STAFF: Pendery Clark, Director
3 Teachers, 3 Teacher Aides, 6 Learning Disabled Cross-Age Tutors, Secretary

CHARACTERISTICS OF TARGET POPULATION:

Fifteen to 20 language and/or motor delayed children (1½ to 4 years) are served in a center-based program by a team consisting of teachers, senior citizen aides and learning disabled cross-age tutors. The range of language and motor delay includes a variety of handicapping conditions.

PROGRAM FOR CHILDREN:

Intensive educational intervention in the areas of language and motor deficits is provided five mornings a week to prepare these children for the least restrictive placement in subsequent preschool and school programs.

MEASURES OF CHILD PROGRESS:

Pre/post measures include project-developed language curriculum objectives (based on Karnes' Early Language Activities), project-developed motor curriculum objectives (based on Capon's Perceptual Motor Program), PPVT, and Koontz Child Development Program. IEP objectives are developed biannually.

PROGRAM FOR PARENTS:

Continuing services include monthly meetings to discuss such topics as child development, individual formal and informal conferences on child progress, and monthly or semi-monthly home visits for demonstrations of appropriate language and motor reinforcement in the home.

STAFF DEVELOPMENT:

Teachers and aides participate in workshops and consultation activities with the Knolls Center staff members who are experienced in language development, assessment and intervention techniques, and with experts in the field of sensorimotor integration and motor development.

SPECIAL FEATURES OF PROGRAM:

The project is located in a public school, thus providing access to a learning disabled cross-age tutor population. Close ties have been established with existing community agencies in order to provide maximum services to the target population.

PEDIATRIC INTERVENTION PROGRAM

FISCAL AGENCY: Sonoma State University

ADDRESS: Academic Foundations, Inc.
Sonoma State University
California Institute for Human Services
Stevenson, Room 2001
1801 E. Cotati Avenue
Rohnert Park, California 94928

PHONE: 707/664-2416
YEARS OF FUNDING: 1

PROJECT STAFF: Thomas P. Cooke, Director; Joan A. Ruskus, Coordinator
Home-based Teacher, 2 Classroom Teachers, Physical Therapist, Occupational
Therapist, Speech Therapist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 25 children ranging in age from birth to 6 years. The children are multihandicapped, profoundly retarded, and medically fragile.

PROGRAM FOR CHILDREN:

Service delivery involves implementing instructional objectives relating to the physiological and behavioral development of the children. It also includes specialized training for staff, services for parents, and coordination of activities involving other community facilities, public institutions, and local school districts.

MEASURES OF CHILD PROGRESS:

Assessment for Infants with Multihandicap System (a new tool) is used to assess the children's progress on a quarterly basis. The instrument entails a neuro-developmental Assessment Protocol, a survey of infant environment, a health assessment record and a clinical reflex profile. The battery and an accompanying curriculum are being developed as a part of the program.

PROGRAM FOR PARENTS:

Parents are involved in the design, implementation, evaluation, and dissemination of the program. They are included on the advisory council, participate in the quarterly and annual review of their child's progress, and are provided with supportive services such as genetic counseling, individual and family counseling and program-related training.

STAFF DEVELOPMENT:

Staff development includes an orientation class for all program employees, specialized classes in techniques of assessment, use of the curriculum system to be designed, programming skills, and dissemination training.

SPECIAL FEATURES OF PROGRAM:

Special features of this program are: (1) its focus on the importance of infant-caretaker bonding in the development of social/emotional, cognitive, and physiological processes in the very young child; (2) its extensive parent component and (3) its dual home classroom approach.

PRESCHOOL/PRIMARY CRITERION TEACHING/PARENT TRAINING PROJECT

FISCAL AGENCY: San Juan Unified School District

ADDRESS: 4425 Laurelwood Way
Sacramento, California 95825PHONE: 916/483-3264
YEARS OF FUNDING: 3PROJECT STAFF: Kit Marshall, Director
4 Teachers, 4 Aides, Transition Aide, Psychologist, Speech/Language Pathologist

CHARACTERISTICS OF TARGET POPULATION:

Thirty-six children, 3 to 8 years of age, are enrolled in two team teaching classrooms. Handicapping conditions include specific learning disabilities and numerous behavioral disorders. Children manifest imperfect abilities to listen, think, and speak, and they are of high-risk for learning to read, write, spell, and do mathematical calculations.

PROGRAM FOR CHILDREN:

Intensive intervention techniques are utilized to accelerate learning for eventual regular class placement. The program provides direct instruction of reading, math, and language, and elimination of "do nothing" time. This approach does not allow for errors in what is taught or how it is taught. Engaged teaching time is approximately 90 percent. Direct teaching of school appropriate behaviors is designed to develop successful school citizens. Integration into regular programs is facilitated by an integration aide to enhance transfer and generalization.

MEASURES OF CHILD PROGRESS:

Continuous progress testing is conducted on a weekly basis to maintain criterion levels in academic areas. Observational checklists are utilized to assess current school appropriate behaviors. Pre- and posttesting includes: Wide Range Achievement Test, Metropolitan Achievement Test, PIAT, and Utah Test of Language Development. Initial placement testing includes McCarthy Scales, PPVT, Stanford-Binet, and other instruments to fully assess functional developmental levels.

PROGRAM FOR PARENTS:

Services to parents are based on a full assessment of parent needs incorporated in a written training plan for each parent. Three levels of training are: (1) small group special interest meetings, (2) written information with follow-up and (3) home visits to develop activity sheets for specific needs.

STAFF DEVELOPMENT:

Weekly staff meetings are held for case and project review. Consultant services are contracted from Englemann-Becker Corporation. Staff participate in training on the refinement of the model. A training model using a module approach to staff development is being developed.

SPECIAL FEATURES OF PROGRAM:

This model is highly specific and contains the requisite elements of an easily replicated program for learning handicapped children. Project experience in integrating these children indicates a high degree of success.

SAN FRANCISCO INFANT PROGRAM

FISCAL AGENCY: Frederic Burk Foundation for Education

ADDRESS: San Francisco State University
Dept. of Special Education
1600 Holloway Avenue
San Francisco, California 94132

PHONE: 415/469-1271
YEARS OF FUNDING: 1

PROJECT STAFF: Marci J. Hanson & E. Wendy Turnbull, Co-Directors
Classroom Teacher, Aide, Physical Therapist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 25 children (birth to 3 years) with handicapping conditions ranging from severely, multiply handicapped to developmentally delayed.

PROGRAM FOR CHILDREN:

Infant skill training is provided across all behavioral areas of development: gross motor, fine motor, cognitive, communication, self-help and social. Parent involvement is encouraged through parent training and support groups.

MEASURES OF CHILD PROGRESS:

The Bayley is used every six months. The SEED and Hawaii Early Learning Profile are continual measures.

PROGRAM FOR PARENTS:

Parents accompany their children to the program and are actively involved in implementing the child training program. Support groups are also available.

STAFF DEVELOPMENT:

A transdisciplinary approach is utilized, with staff members providing instruction to one another in their areas of expertise.

SPECIAL FEATURES OF PROGRAM:

The program is located in a public school.

SHINE FAMILY DAY CARE PROJECT

FISCAL AGENCY: Family Developmental Center

ADDRESS: 3045 Santiago Street
San Francisco, California 94116

PHONE: 415/661-7274
YEARS OF FUNDING: 2

PROJECT STAFF: Judith Lewis, Director; Mary Ann Newcomb, Coordinator
Program Director, Program Associate

CHARACTERISTICS OF TARGET POPULATION:

Ten or more handicapped children (birth to 3) are served. Handicapping conditions include mental retardation, hearing-impairment, speech impairment, visual handicap, serious emotional disturbance, crippling conditions, developmental delays and other health impairments. A majority of the children have multiple handicaps.

PROGRAM FOR CHILDREN:

The children are integrated with nonhandicapped children in full day programs at five or more licensed day care homes. The curriculum is drawn from the University of Hawaii Guide and others as appropriate. Consultant and support services are available as needed.

MEASURES OF CHILD PROGRESS:

The children's progress is assessed biweekly with the University of Hawaii HELP Scale, quarterly with the Bayley, and biannually by a complete multidisciplinary team including parents in order to develop the IEP.

PROGRAM FOR PARENTS:

Parents are involved in parent groups, designing their child's IEP, and interacting with the providers and other staff members. Interviews, Bromwich Parental Behavior Progression ratings, parent needs assessments, and 6-month reassessments are used to determine initial levels of parenting skills and to document progress. Assessment provides the basis for individualizing program services. Self-initiated parent participation activities are documented by providers and staff during one-month sample periods.

STAFF DEVELOPMENT:

Weekly staff meetings are held to review case histories, project progress, and implementation of project components. The coordinator and program assistant participate in 10 preservice training sessions required of the family day care providers who serve project children through contract with the Family Service Agency. Each staff member writes a yearly staff development plan which is reviewed at 6-month intervals with the supervisor. Ongoing inservice training for the providers is scheduled monthly.

SPECIAL FEATURES OF PROGRAM:

This project adds a third choice for educational and therapeutic assistance to two existing programs for young handicapped children operated by the Agency's Family Developmental Center.

PRESCHOOL DEMONSTRATION PROJECT

FISCAL AGENCY: San Jose State University Foundation

ADDRESS: Institute for Research in
Child Development
San Jose State University
125 South Seventh Street
San Jose, California 95192

PHONE: 408/277-2669
YEARS OF FUNDING: 3

PROJECT STAFF: Robert L. Spaulding, Director; Christopher H. Grossman, Coordinator; 2 Head Teachers, Documentation Specialist, Special Education Consultant, Parent Program Coordinator

CHARACTERISTICS OF TARGET POPULATION:

The program serves a variety of handicapped children who are within the mild to moderate range of disability and 3 to 5 years of age. The 22 preschoolers enrolled include 16 nonhandicapped and six handicapped children (two Down's syndrome, two speech impaired, one multihandicapped, one with specific learning disabilities).

PROGRAM FOR CHILDREN:

The Preschool Demonstration Project regards the philosophy of Jean Piaget as a guide for the program's curriculum model. The importance of social interaction, motor development and child-motivated discovery learning is emphasized for both handicapped and nonhandicapped preschoolers. Children are viewed as learning initiators operating within carefully preplanned environments at their own developmental levels. Environments are designed to foster independence and encourage integrative peer interactions and productive use of time and materials.

MEASURES OF CHILD PROGRESS:

The LAP-D is administered upon entrance and exit from the program (twice yearly). CASES data are collected on a daily basis.

PROGRAM FOR PARENTS:

Parent involvement is a vital part of the Demonstration Project. Opportunities for family interaction include center group meetings, specific training in child development, classroom observation and participation, individual child progress conferences, home visits, and informal social events.

STAFF DEVELOPMENT:

All teachers, student teachers, volunteers in the preschool, parents, and professional staff members are provided on-the-job training in classroom management and instruction using the Coping Analysis Schedule for Educational Settings (CASES) and the Spaulding Teacher Activity Recording Schedule (STARS). Professional staff also attend conferences and training institutes related to their project roles.

SPECIAL FEATURES OF PROGRAM:

The Preschool Demonstration Project utilizes a computer-assisted documentation and feedback system that provides information on teaching styles and pupil learning and social interaction styles. Teaching competencies are defined empirically.

COMPUTERS TO AID AND TEACH CHILDREN WITH HANDICAPS
(PROJECT CATCH)

FISCAL AGENCY: S.L.V. Board of Cooperative Educational Services

ADDRESS: 22nd & San Juan
Alamosa, Colorado 81101

PHONE: 303/589-2536
YEARS OF FUNDING: 1

PROJECT STAFF: Shelley Griffie, Director; Jane Clarke, Coordinator
Electronics Specialist, Computer Specialist

CHARACTERISTICS OF TARGET POPULATION:

The project serves children of apparent normal intelligence whose physical handicap interferes with their ability to communicate orally. Children must be from birth to 8 years of age or functioning at third grade or below academically.

PROGRAM FOR CHILDREN:

A language development program utilizing a micro-computer and appropriate software is being developed for use with children.

MEASURES OF CHILD PROGRESS:

The assessment battery, compiled from the Uzgiris and Hunt, Environmental Prelanguage Battery (Horstmeier and MacDonald), Transactional Approach to Early Language Training (Maclean and Snyder-Maclean), is given to each child at 6-month intervals.

PROGRAM FOR PARENTS:

A complete inservice package explaining how to use and adapt the language development program and the computer will be available to parents and professionals. A manual on the language program will be available.

STAFF DEVELOPMENT:

The inservice package for parents will reflect much of the staff development necessary for project implementation.

SPECIAL FEATURES OF PROGRAM:

A computer is used to aid in language development for children with moderate to severe physical handicaps.

PARENT RESOURCE FOR INFANT DEVELOPMENT AND ENRICHMENT
(PRIDE PROGRAM)

FISCAL AGENCY: Boulder County Board for Developmental Disabilities

ADDRESS: 3480 N. Broadway
Boulder, Colorado 80302

PHONE: 303/441-3990
YEARS OF FUNDING: 1

PROJECT STAFF: Sharon Spritzer-Griffith, Director; Vivian Reeves, Coordinator; Clinical Psychologist, Speech & Language Specialist, Occupational Therapist, Child Development Specialist, Secretary/Research Assistant

CHARACTERISTICS OF TARGET POPULATION:

The population includes any child birth to 3 years of age who exhibits developmental delay in one or more of the major developmental areas. Children who fall within this group are high-risk due to significant birth defects or known syndromes associated with mental retardation, environmental deprivation, physical illness, or the potential for delay if intervention is not initiated.

PROGRAM FOR CHILDREN:

Services for children include center visits and home visits, assessment, occupational therapy, speech and language therapy, liaison with other agencies, case reviews, reassessment, and outside referrals. The curriculum is a combination of educational and psychosocial approaches.

MEASURES OF CHILD PROGRESS:

The Bayley, the SICD, and the Milani-Comparetti are the pre- and posttest measures given at 6-month intervals. In addition, the Rivendell Developmental Scale (developed at Rivendell School, Adams County, Denver, Colorado) is used as the criterion-referenced test for monthly program planning.

PROGRAM FOR PARENTS:

Family needs are assessed on a variety of measures including the Family Needs Assessment (WESTAR) and the Attachment-Separation-Individuation Scales (Foley). Family therapy is offered, as well as educational-informational meetings, social groups, parent-to-parent support meetings, and agency liaison. Parents will learn developmental sequences and skills to become teachers of their children. Parents are included on the Advisory Council.

STAFF DEVELOPMENT:

During the first year of the project, extensive inservice training includes: Bayley training, child abuse, issues in psychosocial development, family therapy, etc. In addition, staff is encouraged to participate in local workshops on child development, advanced family therapy, etc. Staff members visited various local infant programs before beginning delivery of service.

SPECIAL FEATURES OF PROGRAM:

As well as developing new facets of a social-emotional curriculum for demonstration, the project is involved in research comparing a full psychosocial/educational program with a traditional infant stimulation program as a control. In addition, for the first six months after entry, each child receives either educational or psychosocial intervention and comparisons are made.

BRIGHTON EARLY EDUCATION PROJECT (BEEP)

FISCAL AGENCY: Adams County District 27J

ADDRESS: 630 S. Eighth Avenue
Brighton, Colorado 80601

PHONE: 303/659-4820
YEARS OF FUNDING: 3

PROJECT STAFF: Lydia Swize, Director
Special Education Specialist, Speech/Language Pathologist, 2 Bilingual Aides,
Aide

CHARACTERISTICS OF TARGET POPULATION:

The project is designed to serve moderately to severely handicapped children ages birth to 5 years. Presently there are 10 children in the classroom program and one child who is receiving home services only. Children with any identified handicap are eligible for services.

PROGRAM FOR CHILDREN:

The program provides a half-day class, four days a week, for group and individualized instruction. Follow-up instruction is provided at home for child and parent. Special therapy is provided in the speech-communication and motor-perceptual areas. The individualized curriculum model is the Teaching Research Curriculum for the Moderately and Severely Handicapped.

MEASURES OF CHILD PROGRESS:

Student progress is measured by use of the placement tests from the curriculum model, with emphasis on language, behavior, motor skills, preacademic skills, and cognitive concepts.

PROGRAM FOR PARENTS:

An individualized home-parent program is delivered according to identified need. Parents are involved in decision making regarding individual student programs and the overall program goals, through participation on the staffing team and the parent advisory committee.

STAFF DEVELOPMENT:

Ongoing staff development is provided by participation in workshops and specialized training sessions.

SPECIAL FEATURES OF PROGRAM:

This program is fully integrated into a public elementary school which provides opportunities for much interaction between handicapped and nonhandicapped youngsters. The school district support staff provide evaluation and follow-up for the BEEP students along with those in other school programs.

MUSIC-ORIENTED INTERVENTION PROGRAM

FISCAL AGENCY: Adams County School District No. 1

ADDRESS: 602 E. 64th Avenue
Denver, Colorado 80229

PHONE: 303/289-2208
YEARS OF FUNDING: 2

PROJECT STAFF: Tom Maes, Director; Holly Graves, Eileen Conroy, David Halterman, Co-Coordination; Social Worker, Psychologist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 30 children, 3 to 5 years, with speech/language, emotional/behavioral, perceptual/communicative, hearing, and multiple handicaps.

PROGRAM FOR CHILDREN:

A program goal is to determine the effectiveness of music as an intervention with a developmental curriculum. There is an experimental session with music and control session without music. Each session meets four days a week for two and one-half hours per day. Individual play therapy sessions are provided as needed.

MEASURES OF CHILD PROGRESS:

The following pre- and posttests are used: McCarthy, Stanford-Binet, Carrow Test for Auditory Comprehension of Language, California Preschool Social Competency Scale, language sample, and Arizona Articulation Proficiency Scale. UPAS is used as a classroom assessment on a quarterly basis.

PROGRAM FOR PARENTS:

The parent program consists of (1) monthly group meetings which are designed to provide general educational information regarding early childhood development and needs; and (2) individualized services for students and families whose specific needs go beyond the scope of the general group meeting.

STAFF DEVELOPMENT:

Staff needs are assessed annually. Staff are provided with opportunities to attend conferences and workshops designed to meet those needs. Staff development activities are documented.

MODEL PROGRAM FOR PERCEPTUALLY AND LINGUISTICALLY
HANDICAPPED PRESCHOOL CHILDREN

FISCAL AGENCY: Colorado State University

ADDRESS: Dept. of Communication Disorders
Colorado State University
Ft. Collins, Colorado 80523

PHONE: 303/491-6981
YEARS OF FUNDING: 1

PROJECT STAFF: Marjorie R. Duffy, Director; Suzanne Streeter, Coordinator

CHARACTERISTICS OF TARGET POPULATION:

Twelve preschool children, 2 to 4 years old, are included in the program. Each child has demonstrated significant disabilities (a delay of one year or more) in perceptual skills, comprehension, retention and/or expression of language. The severely language handicapped children represent various segments of the population, such as socially disadvantaged, lower socioeconomic or bilingual backgrounds.

PROGRAM FOR CHILDREN:

Early intervention, evaluation and remediation for perceptual and language disorders are provided in a preschool classroom setting. Services include audiological and psychological assessments, individual speech/language treatment sessions and mainstreaming into regular preschool settings.

MEASURES OF CHILD PROGRESS:

Children were selected based on their performance on a battery of formal and informal diagnostic procedures. These include the SLCD, PPVT, Vineland, informal gross and fine motor scales, audiological evaluation, informal assessment of functional use of verbal communication, and a linguistic analysis of spontaneous language.

PROGRAM FOR PARENTS:

The parent/family program serves a 3-fold purpose: to increase understanding of each child's unique language problems; to provide basic knowledge in areas of normal speech/language, perceptual and motor development; and to teach ways to bring about a more ideal environment for the development of linguistic competence. These three facets of parental involvement are accomplished through private conferences, group conferences and discussions, home visits, and classroom observation and participation.

STAFF DEVELOPMENT:

Ongoing staff training and development includes orientation, regular staff meetings, special inservice training sessions and professional meetings, workshops and conventions.

SPECIAL FEATURES OF PROGRAM:

A group learning situation and individual treatment sessions concentrate intensively on the individual's unique problems. Key aspects are the integration of linguistically-handicapped children into normal preschool settings and training preschool teachers to deal with the "special child." Carefully-sequenced participation of parents and family members is built on basic knowledge and direct experience in remedial procedures.

JUNCTION EARLY EDUCATION PROGRAMS (JEEPS)

FISCAL AGENCY: Hilltop House Rehabilitation Center

ADDRESS: 1100 Patterson Road
Grand Junction, Colorado 81501

PHONE: 303/242-8980
YEARS OF FUNDING: 2

PROJECT STAFF: Erle H. Reid, Director; Sue Sigwart, Coordinator
2 Teachers, Various Community Consultants, 2 Aides, Speech Pathologist,
Occupational Therapist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 89 preschool children (3 to 5 years) with a variety of handicapping conditions, including those who are learning disabled, seriously emotionally disturbed, speech impaired, and orthopedically impaired.

PROGRAM FOR CHILDREN:

Services include the E.B.D. preschool operating four afternoons a week, a 5-year-old classroom operating two sessions four days a week, and support services to Head Start and day care centers during the afternoons. The JEEPS curriculum offers a total communication approach, teaching many early learning experiences such as daily language time, music, art, story time, gross motor activities, fine motor and manipulative activities, simple cooking, and outside play.

MEASURES OF CHILD PROGRESS:

An IEP is developed for each child using as its base the Jefferson Early Education Profile (JEEP) which sequences a broad range of developmental tasks. This is preceded by a psychological battery administered by School District 51 psychologists and supplemented by other tests as needed.

PROGRAM FOR PARENTS:

The JEEPS parent education program provides effective tools for establishing optimum conditions for child development. One day per week is allotted to parent activities (e.g., discussion groups, conferences, classroom participation). Regular parent interaction groups are also scheduled, as well as father-child and mother-child activities. In addition, staff makes home visits.

STAFF DEVELOPMENT:

Staff meetings are held daily. The staff attends a wide range of professional community and extra-community inservice training sessions, and regular School District 51 resource teacher meetings. Workshops for community professionals are held regularly by JEEPS staff.

SPECIAL FEATURES OF PROGRAM:

This program offers a unique total communication approach to early childhood education involving the use of manual sign language as a vehicle for class curriculum.

EARLY CHILDHOOD PSYCHO-EDUCATIONAL INTERVENTION PROGRAM

FISCAL AGENCY: Greater Bridgeport Children's Services Center
(The Family School)

ADDRESS: 1635 Central Avenue
Bridgeport, Connecticut 06610

PHONE: 203/579-6184
YEARS OF FUNDING: 2

PROJECT STAFF: Robert Suerken, Director; Donald F. Perras, Coordinator
Nursery Teacher, Prekindergarten Teacher, 2 Children's Services Workers,
Psychologist, Psychiatric Social Worker, Consultants

CHARACTERISTICS OF TARGET POPULATION:

The project serves 14 emotionally disturbed/behavior disordered children (2 to 6) who demonstrate moderate developmental deficits in the affective, social, and behavioral domains.

PROGRAM FOR CHILDREN:

A nursery program accommodates seven 2- to 4-year-olds, and a prekindergarten class accommodates seven 4- to 6-year-olds. The curriculum utilizes the LAP, Developmental Therapy, Peabody Early Experience Kit, My Friends and Me Kit, Learning Staircase Kit, and GOAL Mathematics Kit. Classroom management, affective education, and readiness activities are emphasized in the program.

MEASURES OF CHILD PROGRESS:

Instruments used include the LAP-D Informal Checklist, Developmental Therapy Objectives Rating Scale, California Preschool Social Competency Scale, Monterey Readiness Inventory, Zimmerman Preschool Language Scale, Test for Auditory Comprehension of Language, and Goldman-Fristoe-Woodcock Test of Auditory Discrimination. All tests are administered on an initial, quarterly, and annual basis.

PROGRAM FOR PARENTS:

The philosophy of the Family School is family-centered. Family therapy and education facilitate the development of effective parenting skills. Parents observe their children in the project, volunteer in the classroom, and participate in the planning and evaluation of the project.

STAFF DEVELOPMENT:

Inservice training seminars and consultant meetings are scheduled biweekly. Special topics are presented at periodic intervals during the school year.

SPECIAL FEATURES OF PROGRAM:

Individual psychotherapy is provided for each child in accordance with other needs.

MAINSTREAMING AND REHABILITATING
CHILDREN WITH HANDICAPS (MARCH)

FISCAL AGENCY: Easter Seal Rehabilitation Center
Research and Demonstration

ADDRESS: 226 Mill Hill Avenue
Bridgeport, Connecticut 06610

PHONE: 203/366-7551
YEARS OF FUNDING: 2

PROJECT STAFF: Diane Lombardi, Director; Amy L. Sebell, Coordinator
2 Special Education Teachers, Physical Therapist, Occupational Therapist,
Speech Therapist, Social Worker, 2 Paraprofessionals, Secretary

CHARACTERISTICS OF TARGET POPULATION:

Project MARCH serves 20 moderately to severely multihandicapped children (3 to 6 years) with medical, physical, perceptual, social, speech, and/or comprehension problems. The population is 50 percent black, 37 percent white, and 13 percent Hispanic.

PROGRAM FOR CHILDREN:

A model transdisciplinary diagnostic, treatment, and training program is being developed. After the evaluation process and appropriate interaction with the child's local school system, the IEP is prepared. The Rehabilitation Center class meets four mornings per week for 3-hour sessions. The Roosevelt Public School class meets five mornings per week for 2½-hour sessions. The teachers and paraprofessionals are present at all times, with other staff members participating at specified times throughout the morning. The transdisciplinary curriculum includes individual and group instruction.

MEASURES OF CHILD PROGRESS:

The Bridgeport Developmental Evaluation Procedure, parts I and II, are administered before admission to the program and at 6-month intervals thereafter. The IEP is revised according to the results of re-evaluation.

PROGRAM FOR PARENTS:

The parents are present during the initial evaluation and during development of the IEPs. They are encouraged to volunteer on a regular basis in the classroom and to meet with the child's program manager weekly. Evening meetings are also held bimonthly to allow working parents to have input.

STAFF DEVELOPMENT:

Staff meetings are held twice weekly for inservice training, case conferences and project reviews. The goal of inservice and classroom training is to increase the knowledge of each member of the transdisciplinary team and to prepare each staff member to teach and coordinate other disciplines' content.

SPECIAL FEATURES OF PROGRAM:

Consultation with the hospital dietician, pediatric neurologist, audiologist, psychologist, dental clinician, and other specialists is available to project staff.

PROJECT INTERFACE

FISCAL AGENCY: Department of Mental Retardation
Mansfield Training School

ADDRESS: 1289 Stafford Road PHONE: 203/487-1300
Mansfield Depot, Connecticut 06251 YEARS OF FUNDING: 3

PROJECT STAFF: Patricia Bassett & Valerie Taff, Co-Directors
Special Educator, Social Worker, Physical Therapist, Nurse, Psychologist,
Secretary

CHARACTERISTICS OF TARGET POPULATION:

Project Interface serves 50 children (birth to 8 years) who live in the 15 towns of the region served by the Mansfield Training School. The children are severely mentally and/or physically handicapped, and many are multihandicapped.

PROGRAM FOR CHILDREN:

The program is based upon a transdisciplinary approach and is committed to the teaching/learning/working triad. Depending on the child's age and needs, the management program may be very diversified. Options include enrollment in a preschool class, specific therapeutic intervention, or referral to community agencies or other consultants. In all cases, a home program is provided to the family.

MEASURES OF CHILD PROGRESS:

The DDST is sometimes used as an initial screening tool. Other assessment instruments used include the LAP, Bayley, PPVT, and Mansfield Developmental Screening Tool.

PROGRAM FOR PARENTS:

Assistance to the family includes the provision of information regarding the child; intensive treatment designed to improve family adjustment to their child's handicap; and therapy geared toward creating a more stable, accepting and constructive living environment for the child. Parents are educated about their child's handicap(s), taught techniques to deal with handicap at home, and informed of the availability of individual and group counseling. Parents also serve as members of the transdisciplinary team.

STAFF DEVELOPMENT:

Following two weeks of intensive training in the transdisciplinary approach and developmental programming, the staff holds weekly meetings for intra-team training. Team members are expected to demonstrate expertise in their disciplines and to teach other team members and parents helpful techniques.

LEARNING ABOUT DEVELOPMENTAL DELAYS
AND EARLY REMEDIATION (LADDER)

FISCAL AGENCY: The Wheeler Clinic, Inc.

ADDRESS: 91 Northwest Drive
Plainville, Connecticut 06062

PHONE: 203/747-6801
YEARS OF FUNDING: 1

PROJECT STAFF: Jane C. Townsend, Director; Marilyn G. Fithian, Coordinator
Evaluator, Speech Pathologist, Preschool Educator, Occupational Therapist,
Pediatric Nurse

CHARACTERISTICS OF TARGET POPULATION:

The program serves 50 educationally at-risk children (birth to 5) and their parents. To be eligible, a child must exhibit delays in one or more developmental areas or have clearly documented developmental risk factors.

PROGRAM FOR CHILDREN:

A home-based parent training and infant stimulation program is the primary service model for children from birth to 2½ years. Individualized programming focuses on fostering optimal parent-child interaction and enriching the child's home environment. Groups of about 6 children (2½ to 5) attend a center-based preschool several half-days weekly to receive socialization and learning opportunities. Individualized transdisciplinary educational programs are implemented for each child to remediate specific delays and to support age-appropriate learning.

MEASURES OF CHILD PROGRESS:

Assessment tools include the LAP, Goldman-Fristoe Test of Articulation, Preschool Language Scale, Test for Auditory Comprehension of Language, PIAT, REEL, Test for Prelinguistic Semantic Relations, DDST, Ayres, and Sensory-Motor Integration Program.

PROGRAM FOR PARENTS:

Weekly educational/support groups for parents of children enrolled in the preschool program focus on improving parenting skills and relationships and enhancing the parent's teaching role. The project provides respite care for families with developmentally disabled children residing in 25 towns within a 15-mile radius of Wheeler Clinic.

STAFF DEVELOPMENT:

A week of concentrated inservice training is followed by weekly 1-hour inservice training sessions. On a rotating basis, the members of the team teach the other members about their individual specialties.

SPECIAL FEATURES OF PROGRAM:

A major focus of the project is the development and expansion of identification and intervention services for handicapped children from birth to 2.

EARLY INTERVENTION FOR PREMATURE INFANTS
AND THEIR ADOLESCENT MOTHERS

FISCAL AGENCY: National Children's Center, Inc.

ADDRESS: 6200 Second Street, N.W.
Washington, D.C. 20011

PHONE: 202/722-2300
YEARS OF FUNDING: 1

PROJECT STAFF: Chris Owner, Director; Joan Taylor Cehn, Coordinator
2 Teachers, Social Worker, Maternal-Child Nurse, Speech Therapist
(part-time), Physical Therapist, Occupational Therapist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 15 low birth weight or handicapped infants and their mothers who are less than 21 years of age and have not graduated from high school.

PROGRAM FOR CHILDREN:

The project simultaneously operates home- and center-based programs which provide language, gross and fine motor, cognitive, social, and self-help stimulation. The project staff develops individualized education plans and individualized family plans for each child and family based on assessment results. Children attend the center-based program two to five days a week, and home visits are conducted one or two times weekly. The basic theoretical approach is developmental/prescriptive.

MEASURES OF CHILD PROGRESS:

The Bayley, Milani-Comparetti, and the Developmental Programming for Infants and Young Children Language Assessment are administered as pre and post measures. The Early LAP is administered at the beginning of the program and again at 3-month intervals. Classroom data are recorded daily on the children's individualized goals.

PROGRAM FOR PARENTS:

Families receive between one or two home visits per week by the maternal-child nurse, the focus of which is developmental guidance and the general health of the infant. Mothers attend weekly seminars in parenting skills using the Houston Curriculum and participate in their child's classroom one hour per week to receive information pertaining to their child's curriculum goals. The HOME, the Bromwich Parent Behavior Progression, and the Neonatal Perception Inventory are used to measure progress in parent/child interaction. Crisis intervention, supportive, psycho-therapeutic, and family counseling are provided on an as-needed basis. Vocational and academic testing and counseling are provided for the mothers.

STAFF DEVELOPMENT:

Staff members attend conferences and workshops relevant to their responsibilities. Technical assistance is provided by TADS. Inservice training is provided by support staff at the National Children's Center, Inc. Weekly 2-hour meetings are held for case and program review. Off-site agency visits related to staff needs are provided.

SPECIAL FEATURES OF PROGRAM:

The project maintains an interagency referral system and ongoing and active relationships with major health, education, and social agencies in D.C. The program also serves as a site for training programs.

HANDICAPPED INFANT INTERVENTION PROJECT (HIIP)

FISCAL AGENCY: District of Columbia, Department of Human Resources

ADDRESS: D.C. General Hospital
Department of Pediatrics--
Fourth Floor West
1900 Massachusetts Avenue
Washington, D.C. 20003

PHONE: 202/727-3866
YEARS OF FUNDING: 3

PROJECT STAFF: Elaine Vowels, Director
Coordinator/Pathologist, Administrative Assistant, Speech Pathologist,
Management Specialist (part-time), Audiologist (part-time), Clerk-Typist, Child
Development Associate, Social Worker Associate, Occupational Therapist
(part-time), Research Psychologist

CHARACTERISTICS OF TARGET POPULATION:

The project serves high-risk, low income children (birth to 3) with communication and developmental disorders. Most of the children are from minority groups.

PROGRAM FOR CHILDREN:

The program consists of home- and center-based treatment. Goals include early identification, diagnosis, and treatment of high-risk children. Services are coordinated with other agencies (e.g., day care or Head Start programs) which also provide continuity of care. Home visits are made by the social worker associate to introduce the program to families.

MEASURES OF CHILD PROGRESS:

High-risk screening within the hospital utilizes impedance audiometry, review of medical conditions, and biweekly audiological testing (in intensive care unit). Outside referrals are screened via the LAP and the Birth-3 Scale (Bangs and Garrett). The Bayley and REEL are also used.

PROGRAM FOR PARENTS:

Parent training is conducted weekly at the center. Parent group workshops, using the interdisciplinary team approach, are held to teach therapy approaches to parents.

STAFF DEVELOPMENT:

Staff development includes consultation in interdisciplinary areas, site visits, workshops, seminars, conferences, and daily and weekly meetings to update staff on referrals and project aspects.

IMPACT: PARENT TRAINING AND EARLY EDUCATION PROGRAM**FISCAL AGENCY:** Howard University**ADDRESS:** c/o Child Development Center
College of Medicine, Box 19
Howard University
Washington, D.C. 20059**PHONE:** 202/686-6713
YEARS OF FUNDING: 1**PROJECT STAFF:** Rosa Trapp-Dukes, Director; Theresa Mueller, Coordinator
Head Teacher, 4 Graduate Assistants**CHARACTERISTICS OF TARGET POPULATION:**

The target population includes approximately ten children between the ages of birth and 3 who have or are suspect for Down's syndrome.

PROGRAM FOR CHILDREN:

The treatment goal is to bring these children within normal developmental growth norms through early intervention. Services, both diagnostic and direct, are provided in the areas of language, cognition, sensorimotor, and psycho-social. Related services, including genetic counseling, parent counseling, and referrals are also available. Curricula are developed using the IEP approach and the Hayden Model.

MEASURES OF CHILD PROGRESS:

The Bayley is administered every three to six months, depending upon child's rate of progress. The DDST is administered every six months, and the Down's Syndrome Performance Inventory each month.

PROGRAM FOR PARENTS:

Parents or caretakers are required to devote at least one session per week to a training session with their child. Parents have the opportunity to meet together weekly or more often as needed. Monthly community forums, consisting of lectures by experts in the field, and parent workshops train parents in appropriate stimulation of their children. To accommodate the second parent or other family members, weekend sessions are held at scheduled intervals.

STAFF DEVELOPMENT:

Inservice training is conducted by staff members, consultants, and university professionals. Staff members attend conferences and make site visits to similar programs in nearby locations. Staff members are encouraged to present at conferences and generate papers and research. A monthly community forum for parents and staff is being developed.

LIVING STAGE IMPROVISATIONAL THEATRE DEMONSTRATION PROJECT
FOR ORTHOPEDICALLY HANDICAPPED CHILDREN AGES THREE TO EIGHT

FISCAL AGENCY: Arena Stage (Washington Drama Society)

ADDRESS: Sixth & Maine Avenue S.W.
Washington, D.C. 20024

PHONE: 202/554-9066
YEARS OF FUNDING: 2

PROJECT STAFF: Robert Alexander, Director; Wendy Haynes, Coordinator
Assistant Director, Musical Director, Production Manager, 2 Production Assistants, 4 Actors/Educators, Director of Development, Development Assistant, Assistant to the Director, Administrative Assistant

CHARACTERISTICS OF TARGET POPULATION:

The project serves children (3 to 8) with severe orthopedic handicaps.

PROGRAM FOR CHILDREN:

The basic premise of the Living Stage program is that the aesthetic/affective approach stimulates a positive self-concept and increased desire for communication. In turn, there is a positive change in the child's overall receptivity to learning and ability to demonstrate what he or she has learned. In a 2½-hour weekly workshop the children are encouraged to explore and discover the world of imagination. Using a variety of improvisational techniques, the actors/educators involve the children in sound, movement, music and creative exercises.

MEASURES OF CHILD PROGRESS:

Primary measures of child progress include self-concept tests (administered to children every four months), observation of children, and attitude scales completed by parents and teachers.

PROGRAM FOR PARENTS:

The program is structured so that parent involvement includes: frequent on-site observation of workshops; ongoing consultations (including home visits) with the project coordinator regarding child progress and program goals; three formal meetings per year to discuss objectives and techniques of the Living Stage program; and the option to participate in monthly training workshops in improvisation with the project director. The major goal of the parent component is to impact on parental attitudes toward the child's capabilities.

STAFF DEVELOPMENT:

Inservice training for the Living Stage staff is an ongoing process beginning with a 2-month period of intensive daily rehearsals. Detailed planning goes into every performance/workshop and each workshop is followed by an in-depth evaluation session led by the director. These sessions include observations about individual children, as well as an intensive critique by the director on each staff member's work for that day. The sessions result in a typed report which then becomes available for study and review by all project staff, and also serves as a continuous log.

PROJECT UPSTART: DEVELOPMENTAL PRESCHOOL EDUCATION FOR
THE SEVERELY/PROFOUNDLY HANDICAPPED

FISCAL AGENCY: D.C. Society for Crippled Children

ADDRESS: 2800 13th Street, N.W.
Washington, D.C. 20009

PHONE: 202/232-2342
YEARS OF FUNDING: 3

PROJECT STAFF: D. Lee Walshe, Director; Larry Szuch, Coordinator
2 Special Education Teachers, 2 Registered Occupational Therapists, Speech
Pathologist, 2 Teacher Assistants, Project Secretary

CHARACTERISTICS OF TARGET POPULATION:

Twenty-four severely/profoundly multihandicapped children are served by the project. Handicaps include cerebral palsy, seizure disorders, Down's syndrome, microcephaly, hydrocephaly, post spinal meningitis, mental retardation, blindness, and deafness.

PROGRAM FOR CHILDREN:

Based on the rationale that improvement of neuro-sensorimotor function will contribute to educational progress, Project UPSTART weaves techniques of neuro-developmental therapy and sensory integration into the educational program. Two classrooms, each operating a half-day, provide training in all curriculum areas. The project has developed a plan for sequencing activities along a neuro-sensorimotor spiral and uses the program to develop individualized plans for each child. The gross and fine motor program is totally integrated into the classroom structure and consists of individual handling, positioning, pre-ambulation, and control of the sensory environment through therapeutic intervention.

MEASURES OF CHILD PROGRESS:

The following measures are administered in September/October and again in May/June: Test of Gross Motor and Reflex Development, Pre-Speech Assessment Scale, Early LAP, Vineland, Cattell, and REEL. At mid-year the Early LAP and REEL are updated.

PROGRAM FOR PARENTS:

The parent program consists of pre and post administration of the HOME, parent counseling (group and individual), individual parent training in education and therapy, social events, parent meetings, and membership on the Advisory Committee.

STAFF DEVELOPMENT:

Staff members attend on-site workshops, professional meetings, and outside training programs in areas of professional importance. Consultants offer suggestions throughout the year for enhancing programs for the children and their families.

SPECIAL FEATURES OF PROGRAM:

A training program for volunteers has been developed.

THERAPEUTIC EDUCATIONAL DAY CARE FOR INFANTS (TEDI)

FISCAL AGENCY: The Hospital for Sick Children

ADDRESS: 1731 Bunker Hill Road, N.E.
Washington, D.C. 20017

PHONE: 202/832-4400
YEARS OF FUNDING: 2

PROJECT STAFF: Elliott E. Lapin, Director; Etrulia R. Lee, Coordinator
Teacher, 2 Teacher Aides, Pediatric Physical Therapist, Occupational
Therapist, Language Therapist, Consultant Psychologist, Bus Driver

CHARACTERISTICS OF TARGET POPULATION:

The project serves 13 severely multihandicapped children (birth to 5) who are institutionalized or at risk for institutionalization.

PROGRAM FOR CHILDREN:

The center-based project provides a full-day, five-day-a-week, year-round educational and therapeutic program. The curriculum includes a combination of sensory integration and competency-based approaches. An individual program is developed for each child as prescribed by P.L. 94-142. Community agencies provide consultant services as needed.

MEASURES OF CHILD PROGRESS:

Upon enrollment in the program, each child is assessed using the Callier-Azusa Scale, Milani-Comparetti, and REEL. The first assessment is updated monthly as the child attains or strengthens skills; the other two are administered yearly as cumulative indicators of child progress.

PROGRAM FOR PARENTS:

A program goal for parent/family service is to provide training and support services which help parents interface with community agencies and maximize the effectiveness of services delivered. The basic and most important support service provided to parents is a comprehensive program for their children. Other services include group and individual meetings, training sessions in the classroom, monthly workshops, periodic lectures, and media presentations. Periodic interviews assess the effectiveness of the parent education program. Parents also are active members of the therapeutic-educational team.

STAFF DEVELOPMENT:

The project director serves as the staff development coordinator. Weekly staff meetings are held to: (1) review, evaluate, revise, and extend program components as needed; (2) meet with staff or community professionals; and (3) examine children's individual programs and progress.

SPECIAL FEATURES OF PROGRAM:

Public school and agency personnel who are responsible for the education of project children once they reach school constitute an additional target group of this project. The project also has a program evaluation implemented by the staff and employs an external evaluation firm.

COMPREHENSIVE CARE TO THE HIGH RISK/HANDICAPPED NEWBORN

FISCAL AGENCY: Mailman Center, University of Miami

ADDRESS: P.O. Box 016820
Miami, Florida 33101

PHONE: 305/547-6961
YEARS OF FUNDING: 1

PROJECT STAFF: Richard Iacino, Director
Neonatal Family Counselor, Clinical Social Worker, Nurse Coordinator,
Evaluator

CHARACTERISTICS OF TARGET POPULATION:

Included in the target population are infants admitted to Jackson Memorial Hospital newborn special care units, the parents or primary caregivers of these newborns, and the developing statewide network of regionalized perinatal care centers and infant intervention projects. The project currently screens 200 children a year, and provides hospital-based intervention for 55 children and home-based intervention for 15.

PROGRAM FOR CHILDREN:

All newborns with a prognosis of extended hospitalization (beyond 3 weeks) are screened into three risk groupings: handicapped, high-risk for developmental delay, and low-risk for developmental problems. Infants in the high-risk group are provided supplemental stimulation, and the infants in the handicapped group are provided rehabilitative developmental intervention programming. The low-risk group remains in a nonintervention and monitored status. The program focuses primarily on appropriate sensorimotor development and early social interaction. Stimulation activities are derived from existing hospital nursery program curricula and some project-developed material.

MEASURES OF CHILD PROGRESS:

The developmental progress of infants in the nursery intervention project is monitored by a project-developed instrument. Infants in the home-based program receive a semiannual multidisciplinary evaluation as part of a high-risk follow-up evaluation program sponsored by the state.

PROGRAM FOR PARENTS:

Every mother of a newborn infant admitted to a special care program is visited by the project staff to (1) provide early supportive contact and (2) assess the need for continuing social service or counseling. Staff members coordinate the initial visit of the mother to the newborn in the special care unit. Weekly evening information and counseling groups are provided, as well as pre-discharge special well-baby care instruction.

STAFF DEVELOPMENT:

Project staff members participate in a wide range of inter- and intra-disciplinary weekly seminars sponsored by the hospital, the University Department of Pediatrics, and the Mailman Center. Weekly staff meetings provide a mechanism for project coordination and specialized inservice development.

ECHO-PARENT/INFANT EDUCATION PROJECT

FISCAL AGENCY: School Board of Orange County

ADDRESS: c/o Dept. of Neonatology
Orlando Regional Medical Center
1414 S. Kuhl Avenue
Orlando, Florida 32806

PHONE: 305/841-5111
YEARS OF FUNDING: 1

PROJECT STAFF: Shelby Morrison, Director; Linda Stone, Coordinator
2 Parent/Infant Educators

CHARACTERISTICS OF TARGET POPULATION:

The project serves 30 infants selected from the Orlando Regional Medical Center Neonatal Intensive Care Unit who are considered at risk for handicapping conditions. Criteria for selection of this population include Apgar scores, birth weight, medical condition, and residency. A second target population is parents of all NICU patients.

PROGRAM FOR CHILDREN:

Upon discharge from the hospital, infants are enrolled in a weekly home-based intervention program. Individual profiles will be developed for each infant in the areas of sensory, language, and personal-social development, and IEPs will be written. The general program objective is to assist parents in helping their child toward optimum growth through weekly home intervention, thereby decreasing the need for long-term special education or institutionalization for the handicapped child.

MEASURES OF CHILD PROGRESS:

Each child is evaluated at 6-month intervals with the Bayley, REEL, James Nurturing Scale, and audiological, physical, and neurological examinations. Assessment and evaluation results are shared with the parents.

PROGRAM FOR PARENTS:

A parent counseling and training program are developed. Support services use a peer-counseling and/or discussion group format. Parents in the home-based program are trained in teaching techniques. A model in-hospital parent education program for parents of high-risk neonates is also being developed.

STAFF DEVELOPMENT:

Staff development programs are required of the project staff and open to all interested persons. A basic medical seminar is held to acquaint staff with the terminology, characteristics, and effects of congenital syndromes, physical abnormalities, and neurological dysfunctions observed in high-risk neonates. Program staff members participate in regular needs assessments which dictate the content of the staff development program.

FAMILY INTERVENTION PROJECT

FISCAL AGENCY: Georgia State University

ADDRESS: Box 664
University Plaza
Atlanta, Georgia 30303

PHONE: 404/658-3270
YEARS OF FUNDING: 3

PROJECT STAFF: Michael Berger, Director; Debby S. Guthrie, Coordinator
Behavior Therapist, Early Childhood Educator, Physical Therapist, 7 Case
Managers

CHARACTERISTICS OF TARGET POPULATION:

The Family Intervention Project serves the families of 43 handicapped children ranging in age from birth to 3 years. All families are residents of Fulton County.

PROGRAM FOR CHILDREN:

Home-based services are provided to families of handicapped children. Weekly home visits provide parent training in educational, social/emotional, motor, and behavioral skills. For some children, the primary focus is preparation for normal preschool placement and assistance in the transition from home training to school placement.

MEASURES OF CHILD PROGRESS:

Initial assessments include developmental evaluations with the Bayley or McCarthy; motor assessment with the Milani-Comparetti; and language assessment with the Sequenced Inventory of Communication Development. Child evaluations are completed every six months so that progress can be traced and programs updated.

PROGRAM FOR PARENTS:

Family measures (questionnaires) are given during the initial family assessment as well as at 6-month intervals (to accompany child progress data). Parents attend group meetings, receive weekly family training, participate in Advisory Board activities, and assist in developing a program to be implemented within the family.

STAFF DEVELOPMENT:

New staff members receive a 2-month training period at Georgia State University which examines child assessment procedures, child development, behavior management, pediatric neurology, and family therapy. Inservice training is continued during the year by using consultants and by participating in outside continuing education and workshops.

PRESCHOOL READINESS EDUCATION PROGRAM (PROJECT PREP)

FISCAL AGENCY: Metropolitan Cooperative Educational Service Agency
(M-CESA)

ADDRESS: Mt. Carmel Elementary School
2356 Fairburn Road
Douglasville, Georgia 30135

PHONE: 404/942-5266
YEARS OF FUNDING: 3

PROJECT STAFF: Jodie J. Morris, Director
3 Teachers, 3 Teacher Aides, Social Worker, Speech Therapist, Clinical Psychologist, Secretary

CHARACTERISTICS OF TARGET POPULATION:

Twenty-four children (3 to 5 years) are served in three self-contained classrooms. The target population includes gifted-handicapped, abused-handicapped, and developmentally delayed children.

PROGRAM FOR CHILDREN:

The children are enrolled in a center-based program which operates five mornings per week. The program includes lunch and transportation. A home-based program is provided in the afternoons. Each child's program is individualized. A developmental curriculum is utilized for center-based activities.

MEASURES OF CHILD PROGRESS:

The LAP-D, Slosson, PPVT, and Photo Articulation Test are used for pre- and posttesting. Behavioral treatment plans, speech therapy treatment plans, and IEPs are rewritten or updated when the child has mastered target behaviors.

PROGRAM FOR PARENTS:

Classroom observations, monthly mothers' meetings, and quarterly evening parent meetings are conducted. The home-based program operates in the afternoons. Individual and family counseling/therapy is provided by the social worker and staff.

STAFF DEVELOPMENT:

Orientation sessions are conducted for all staff. Inservice activity largely takes the form of workshop and task force work sessions. Weekly staff meetings are held to discuss program operations. Monthly sessions are scheduled to provide specific training.

SPECIAL FEATURES OF PROGRAM:

M-CESA is part of a statewide network of regional service agencies established by the Georgia State Legislature in 1972. M-CESA services are available to the 7-county Atlanta metro area. Project PREP is located within the Douglas County school system.

DEMONSTRATION PROJECT FOR PRESCHOOL HANDICAPPED CHILDREN

FISCAL AGENCY: Fort Valley State College

ADDRESS: P.O. Box 5483
Fort Valley State College
Fort Valley, Georgia 31030

PHONE: 912/825-6361
YEARS OF FUNDING: 2

PROJECT STAFF: Alma Calloway, Director
2 Classroom Teacher Aides, Office Manager/Secretary, Special Education
Specialist, Lead Teacher

CHARACTERISTICS OF TARGET POPULATION:

The project serves children (3 to 5) with varying types and degrees of handicaps.

PROGRAM FOR CHILDREN:

This center-based program offers the handicapped child counseling and participation/interaction in educational programs. The project also serves as a source of information about services for handicapped children and works to heighten community awareness of the problems faced by project children.

MEASURES OF CHILD PROGRESS:

The California Developmental Profile, the Boyd Developmental Scale, and the Stanford-Binet are administered every six months.

PROGRAM FOR PARENTS:

The family coordinator educates parents regarding therapy techniques and the education/development of their children. The coordinator makes home visits as needed. Parent meetings are held monthly.

STAFF DEVELOPMENT:

Individual assignments and professional meetings constitute project staff development activities.

CHILD-FAMILY-COMMUNITY (C-F-C)

FISCAL AGENCY: Thomas County

ADDRESS: P.O. Box 110-A
Ochlocknee, Georgia 31773

PHONE: 912/574-5123
YEARS OF FUNDING: 1

PROJECT STAFF: Sonia Walker, Director; Lillie Bogan, Coordinator
Family Worker, Paraprofessional, Secretary

CHARACTERISTICS OF TARGET POPULATION:

Three target groups include: (1) 50 children (birth to 5) who are high-risk, handicapped, abused-handicapped, or moderately to severely/profoundly handicapped; (2) families of handicapped children, and (3) community human- and child-service agencies. The project maintains a zero-reject policy.

PROGRAM FOR CHILDREN:

Five levels of disposition are available: Level 0 - No services are necessary; Level I - The child is referred to community resources and followed up by the project; Level II - The child is referred to a community service, with the project providing monthly or biweekly tracking and a home-based program; Level III - Direct project services are given to the parent and child through a home- or center-based program, concurrent with placement in another program; Level IV - The child receives only project services.

MEASURES OF CHILD PROGRESS:

Developmental gains are measured pre and post by both norm-referenced (Bayley) and criterion-referenced instruments (Portage, LAP-D, Brigance).

PROGRAM FOR PARENTS:

A family needs assessment results in an individual family plan (IFP) which reflects the level of project involvement with the child. The methods used to meet needs may range from group work to individual work with families.

STAFF DEVELOPMENT:

The project coordinator determines staff training needs and arranges training activities.

SPECIAL FEATURES OF PROGRAM:

Community health and child agencies are direct service targets for the purposes of (1) enabling an agency to provide better services to handicapped children, and (2) improving the ability of agencies to deliver comprehensive services to all handicapped children. These efforts are supported by the project through technical assistance agreements with agencies and through advocacy activities.

EDUCATIONAL SERVICES FOR HANDICAPPED INFANTS AND CHILDREN:
A RURAL MODEL

FISCAL AGENCY: College of Education, University of Idaho

ADDRESS: Department of Special Education
University of Idaho
Moscow, Idaho 83843

PHONE: 208/885-6150
YEARS OF FUNDING: 2

PROJECT STAFF: Dale Gentry & Maynard Yutzy, Co-Directors; Cathy Nakao,
Coordinator

CHARACTERISTICS OF TARGET POPULATION:

The project serves 23 children, birth to 5 years, who have been identified as "high risk" or as having a known syndrome resulting in mental retardation or other developmental delays.

PROGRAM FOR CHILDREN:

Children receive programs either in a home-based model or in a combination home- and center-based model, as determined by the child's individual strengths and needs, parent(s) input, accessibility to center, and assessment information. A functional curriculum approach determines the child's daily programs and involves a process for identifying and instructing skills which are immediately usable in and generalized across the child's home, school and leisure environments.

MEASURES OF CHILD PROGRESS:

A combination of measurement instruments are utilized in child programming, depending upon the child's individual strengths and needs and the particular program conducted. Daily progress data are collected by either staff or parents and are reported in weekly, monthly, quarterly and annual intervals. A content lattice comprises the total program evaluation system, including the type and frequency of child programs, parent and staff instruction, and total project cost.

PROGRAM FOR PARENTS:

Parents are involved in the project's Instructional Exchange Program, which reflects a philosophy that a balanced relationship among staff, parents, and others involved with the child is mandatory. Staff and parents participate in programs which cover a variety of topics, including instructional strategies, assessment and curriculum, data collection, and so forth. Small group instruction is conducted, with practical assignments given and reviewed regularly. A brochure describing the Instructional Exchange is available.

STAFF DEVELOPMENT:

Staff participates in the Instructional Exchange Program with parents and trains with various agency personnel to acquire skills necessary for working with young handicapped children.

SPECIAL FEATURES OF PROGRAM:

The project uses a systems approach to identify goals and objectives, a lattice technique to identify specific tasks for completion, and a PERT/CPM technique for scheduling and planning the program implementation. A paper describing the system is available for dissemination.

A MODEL PROGRAM FOR HEARING-IMPAIRED INFANTS PROVIDING
MEDICAL, ACADEMIC, AND PSYCHOLOGICAL SERVICES (HI-MAPS)

FISCAL AGENCY: Michael Reese Hospital and Medical Center

ADDRESS: David T. Siegel Institute for PHONE: 312/791-2900
 Communicative Disorders YEARS OF FUNDING: 1
 Michael Reese Hospital & Medical Ctr.
 3033 S. Cottage Grove Avenue
 Chicago, Illinois 60616

PROJECT STAFF: Marci Enos, Director; Valerie Feldman, Coordinator

CHARACTERISTICS OF TARGET POPULATION:

Hearing handicapped infants and toddlers (birth to 3), including those with neurological, orthopedic and/or emotional/behavioral handicaps are served.

PROGRAM FOR CHILDREN:

Services include comprehensive medical/developmental evaluations, parent/infant educational sessions (individual and/or group sessions), otological/audiological services, medical follow-up (ophthalmological, pediatric neurological, etc.), and occupational/physical therapy as needed.

MEASURES OF CHILD PROGRESS:

Instruments used include the Bayley, Vineland, and 20 diagnostic tests (developed by Quidley et al.) to assess the syntactic abilities of young hearing impaired children. Development is underway on assessment instruments and techniques to measure growth in language and social skills, and on an evaluative analysis for parent involvement model.

STAFF DEVELOPMENT:

Staff development activities includes inservice training sessions on topics such as child development, assessment, and deaf education; sign language/communication classes; workshops by experts in deaf education and related fields; participation in conferences, meetings, and professional organizations; and a summer workshop for preschool and elementary teachers.

LITTLE EGYPT EARLY CHILDHOOD PROGRAM
(PROJECT LEEP)

FISCAL AGENCY: Southern Illinois Educational Service Center

ADDRESS: JAMP Diagnostic Center
Route #1
Karnak, Illinois 62956

PHONE: 618/634-9568
YEARS OF FUNDING: 3

PROJECT STAFF: Larry Goldsmith, Director; Willa D. Propst, Coordinator
2 Speech-Language Pathologists, 3 Classroom Teachers, 3 Classroom Paraprofessionals, Home Program Teacher, Home Program Teacher/Coordinator, 3 Home-Based Paraprofessionals, Nurse, Physical Therapist, 3 Psychologists

CHARACTERISTICS OF TARGET POPULATION:

Children birth to 5 years of age are eligible regardless of severity or multiplicity of handicap, except deaf and deaf/blind 3- to 5-year-olds who are served in regional or state programs.

PROGRAM FOR CHILDREN:

Center- and home-based delivery systems are employed for 3- to 5-year-old children, the choice of which is determined by several criteria. Services for birth to 2-year-olds are home-based, supplemented by center-based parent-child activities. Speech and language services are provided in the home via a consultative model and in the center via direct therapy and coordinated teacher/clinician programming. The CAP System, with behavioral objectives in five developmental areas, forms the basis of the curriculum. The PEECH Model provides the framework for classroom instruction.

MEASURES OF CHILD PROGRESS:

Within 30 days of placement, the CAP System diagnostic instrument is used. Reassessment occurs as objectives are achieved and at the end of the year. Pre and post measures for 3- to 5-year-olds include the Stanford-Binet, Vineland, VMI, PPVT, and Preschool Language Scale. Pre and post measures for birth to 2-year-olds are Cattell, Vineland, and Preschool Language Scale. Children with speech or language delays are pre- and posttested with a battery of tests.

PROGRAM FOR PARENTS:

Individualized parent training is provided in assessment, teaching and behavior management skills, child development, and specific handicapping conditions. Parents are involved in diagnostic assessment and program planning. Parents in the home program serve as the primary teachers for their children. Parents in the center program act as partners with classroom personnel, working at home on specific educational objectives.

STAFF DEVELOPMENT:

Staff development includes a preservice training week and regular inservice training workshops. Paraprofessionals receive individualized training by their supervising teachers. Staff training includes assessment, teaching, behavior management and parent training skills.

SPECIAL FEATURES OF PROGRAM:

LEEP is an interagency program, providing coordinated services through the Department of Mental Health and the public schools.

PRE-START: A FAMILY-FOCUSED MODEL OF SERVICES
FOR HIGH-RISK INFANTS

FISCAL AGENCY: Department of Pediatrics, Loyola University, Stritch School
of Medicine

ADDRESS: 2160 S. First Avenue
Maywood, Illinois 60153

PHONE: 312/531-3499
YEARS OF FUNDING: 2

PROJECT STAFF: Jennie E. Swanson, Director
Parent Coordinator, Nurse Consultant, Clinical Psychologist, External Evalu-
ator, 2 Medical Consultants

CHARACTERISTICS OF TARGET POPULATION:

The project serves the families of 60 infants from a neonatal intensive care unit who were born at Loyola University McGaw Hospital or transferred to the hospital from 12 community hospitals. Children from birth to age 3 and their families are eligible.

PROGRAM FOR CHILDREN:

The Pre-Start project, developmental and interdisciplinary in approach, is based on a family-child competency model. Each child's competencies are described as a basis for more successful parent-infant transactions.

MEASURES OF CHILD PROGRESS:

Measures include the Apgar (at birth); Assessment of Term Characteristics (at birth and within 10 days); DDST and the Infant Follow-up (at 1, 3, 7, 12, 18, 24, and 30 months); Parent Questionnaire (7 and 30 months); Schmerber Parent Attitude Survey (at term, one and three months, and one year), and a pediatric neurology exam (once a year, if indicated).

PROGRAM FOR PARENTS:

A team from medicine, education, psychology and nursing serves as a resource to parents, the primary facilitators for infants. Program options include: parent-to-parent support and contact, individual and family counseling, information seminars, charting by parents using Partners in Child Development, and crisis intervention.

STAFF DEVELOPMENT:

An initial orientation and assessment of staff (group and individual) needs was followed by ongoing programs, consultant services, evaluation, and planning. Weekly meetings are held for activity and need updating.

TRANSITIONAL RESOURCE ADDRESSING CHILDREN'S EARLY EDUCATION
(PROJECT TRACE)

FISCAL AGENCY: West Chicago Elementary School District #33

ADDRESS: 312 E. Forest Avenue
West Chicago, Illinois 60185

PHONE: 312/231-1670
YEARS OF FUNDING: 2

PROJECT STAFF: Barbara D. Waller, Director; Susan F. Wilcox, Coordinator

CHARACTERISTICS OF TARGET POPULATION:

Fifty-five handicapped children (3 to 8 years) are served in four placement alternatives. The children must exhibit a 12-month delay, as determined by standardized instruments, in one or more of the following areas: gross and fine motor, self-help skills, receptive and expressive language, visual and auditory processing skills, social behavior, or pre-readiness, readiness and/or academic skills.

PROGRAM FOR CHILDREN:

The TRACE structure consists of four placement alternatives: a preschool handicapped program, supportive service to private nursery schools, transitional kindergarten, and transitional primary program. The curriculum is developmental and focuses on the areas of self-help, motor, receptive and expressive language, visual and auditory processing, social behavior and pre-readiness, readiness and/or academic skills. This curriculum is implemented via each student's individualized educational program resulting from a process of referral, case study evaluation, and multidisciplinary staffing.

MEASURES OF CHILD PROGRESS:

Each student receives a case study evaluation prior to placement in a program. The evaluation includes a standardized measurement of the child's intellectual potential, achievement, processing skills, motor development, speech and language skills, and social behavior. Deficit areas are re-evaluated in the spring to measure progress. Several methods are employed to assess child progress. Systematic data collection on all IEP goals and objectives is utilized, as well as pre- and posttest measures. The Rockford Individual Educational Guide is employed to provide consistency and continuity of measurable objectives.

PROGRAM FOR PARENTS:

Parent-family participation includes monthly home visits at the preschool level and quarterly conferences at the other placement alternatives. Weekly newsletters are sent home and monthly parent meetings are conducted for parents of handicapped and nonhandicapped children, focusing on needs identified through a parent questionnaire. Support services are available from the district's pupil personnel services staff.

STAFF DEVELOPMENT:

An initial staff training session is followed by continuing inservice training based on a staff development agreement between each staff member and the director. Staff attends bimonthly project meetings, county and state workshops, institutes and conventions pertaining to early childhood special education, as well as other projects in the state that address early intervention for handicapped children.

MONROE COUNTY MULTICATEGORICAL MODEL PRESCHOOL

FISCAL AGENCY: Indiana University, Developmental Training Center

ADDRESS: 2853 E. 10th Street
Bloomington, Indiana 47405

PHONE: 812/337-6805
YEARS OF FUNDING: 2

PROJECT STAFF: Susan K. Shuster, Director; Gen Shelton, Coordinator
2 Demonstration Teachers, 2 Instructional Associates, Physical Therapist,
Occupational Therapist, Speech/Language/Hearing Specialist, Psychologist, Social
Worker, Curriculum Developer/Evaluator

CHARACTERISTICS OF TARGET POPULATION:

Twenty children (3 to 6 years) with a range of handicapping conditions are served by the project.

PROGRAM FOR CHILDREN:

The project operates a center-based, noncategorical program and enrolls children in the least restrictive environment for normalization. The curriculum is drawn from adaptations of existing curricula.

MEASURES OF CHILD PROGRESS:

Instruments used to measure child progress include the Indiana Preschool Developmental Assessment Scale (twice yearly), the Portage Behavior Checklist, and the locally-developed Thesaurus of Behavioral Objectives.

PROGRAM FOR PARENTS:

Parents are trained as planners and advocates. The project assists in the acquisition of supplementary services for parents through other agencies.

STAFF DEVELOPMENT:

Activities include local, regional, and state workshops, and visits to other sites. Consultants provide specific training according to the needs of staff. Weekly staff meetings are held to review activities and update staff members.

SPECIAL FEATURES OF PROGRAM:

A unique element of the project is a strong cooperative relationship between the university, SEA, and LEA, including cooperation with Indiana State Department personnel.

A TRANSDISCIPLINARY APPROACH TO THE EVALUATION OF
SEVERELY/MULTIPLY HANDICAPPED PRESCHOOL CHILDREN

FISCAL AGENCY: Department of Special Education, University of Kansas

ADDRESS: Dept. of Special Education
Herbert C. Miller Building
University of Kansas Medical Ctr.
Kansas City, Kansas 66103

PHONE: 913/588-5946
YEARS OF FUNDING: 2

PROJECT STAFF: Cindy Billionis, Director
Parent Consultant, Teacher, 4 Teacher Assistants

CHARACTERISTICS OF TARGET POPULATION:

Fifteen preschool children (birth to 6 years) with severe and profound multiple impairments are served. Children must manifest severe or profound (functional) retardation with at least one additional handicapping condition.

PROGRAM FOR CHILDREN:

Each child receives educational programming five days per week from 9:30-3:00 p.m. Individual programs emphasize the development of functional skills which are applicable to the classroom, home, and community environment. Specific programs are designed and implemented by members of the transdisciplinary team, dependent upon the child's handicapping conditions. Each child receives both individual and group instruction. Children exhibiting the most severe feeding difficulties also receive training during a lunch session.

MEASURES OF CHILD PROGRESS:

A comprehensive transdisciplinary evaluation is conducted at the beginning of each year, prior to the IEP conference. Follow-up assessments are conducted in January and May to monitor child progress. Assessment instruments include the Callier-Azusa Scale, TARC, Bayley, Pennsylvania Training Model and Individual Assessment Guide, Performance Assessment Battery, Developmental Profile, Developmental Programming for Infants and Young Children I, Vineland, and Environmental Pre-language Battery. Audiological and dietary assessments are also conducted. In addition, a feeding evaluation and a range of motion checklist are being field-tested in the classroom. Formative evaluation is a continuous process. Data are collected daily and used to make determinations about continuation or modification of intervention strategies.

PROGRAM FOR PARENTS:

Parents are provided with information and skills to facilitate active participation in their child's education. Regular group parent meetings involve lectures and discussions to supplement curriculum modules covering general child growth and development, causes and treatment of specific handicapping conditions, skill development and teaching techniques, and information on the transdisciplinary approach. Parent-child teaching in both the classroom and at home are available, with feedback from staff during home visits.

STAFF DEVELOPMENT:

All staff and students in the program engage in training opportunities within the KU Medical Center Complex, including weekly seminars on topical issues and program descriptions of the various disciplines. Staff and students are encouraged to attend local, state, regional, and national conferences.

EASTERN KENTUCKY COALITION FOR THE HANDICAPPED

FISCAL AGENCY: United Cerebral Palsy of the Bluegrass

ADDRESS: P.O. Box 8003
465 Springhill Drive
Lexington, Kentucky 40503

PHONE: 606/278-0549
YEARS OF FUNDING: 2

PROJECT STAFF: Flonnia Taylor, Director; Jo Allard, Coordinator
Pediatric Neurologist, Speech Pathologist, Occupational Therapist, Physical
Therapist, Teacher, Home Service Worker

CHARACTERISTICS OF TARGET POPULATION:

The project serves 30 multihandicapped children, ages birth to 10.

PROGRAM FOR CHILDREN:

The project operates two classroom programs and one home-based program. Children birth to 5 are served at home by a trained home service worker after receiving a comprehensive evaluation. Coordinating with the local public school system, the Coalition offers two classrooms for multihandicapped children ages 6 to 10. Children participate in individual and small group instruction in the classroom until they are able to function successfully in a regular education program. Weekly physical therapy services are provided. Other education professionals provide consultation services at least one half-day per week.

MEASURES OF CHILD PROGRESS:

Classrooms for the multihandicapped use the Brigance, Lexington Development Scale, PIAT, PPVT, Motor-Free Visual Perception Test, VMI, and others as appropriate on a pre- and posttest basis. The preschool program uses the DDST and a neurological for screening, and the Lexington Developmental Scale, LAP, Uzgiris-Hunt, and pre-speech and language tests for evaluation.

PROGRAM FOR PARENTS:

Parents complete a needs assessment form and receive services in accordance with their stated needs. Program options include mothers' groups, parent training by consultants, newsletters, workshops, and membership on the Advisory Board.

STAFF DEVELOPMENT:

Staff members receive inservice in addition to preservice training. Training is offered at program sites for parents, paraprofessionals, and professionals.

SPECIAL FEATURES OF PROGRAM:

The model classroom for the multihandicapped has been replicated by one site during the 1979-80 school year. Other school systems plan to replicate during the upcoming year. A replication manual will be printed.

LOUISVILLE SCHOOL FOR AUTISTIC CHILDREN
DEMONSTRATION PRESCHOOL PROJECT

FISCAL AGENCY: Louisville School for Autistic Children

ADDRESS: 601 Nottingham Parkway
Louisville, Kentucky 40222

PHONE: 502/426-3530
YEARS OF FUNDING: 3

PROJECT STAFF: Jayne D. Miller, Director

Readiness Teacher, Preschool Teacher, 2 Teachers' Aides, Speech Therapist, Music Therapist, Family/Community Coordinator, Secretary, Business Manager, Consulting Psychologist, Research Assistant

CHARACTERISTICS OF TARGET POPULATION:

The project serves children (2 to 8) who are designated as severely handicapped with autistic-like behavior. Behavioral characteristics may include: severe language or perceptual cognitive deprivation, failure to respond appropriately to pronounced social stimuli, self-mutilation, self-stimulation, intensive and prolonged temper tantrums, or the absence of rudimentary forms of verbal control.

PROGRAM FOR CHILDREN:

Project staff utilizes behavior modification techniques to shape the student's ability to function in increasingly larger educational units. Three one-hour sessions are conducted initially, with a one-to-one teacher-to-student ratio. Students are placed concurrently in one or more tracks of the RADEA program, a developmental specific skills program, and in the LSAC Adaptive Skills Curriculum. The primary focus of the speech program for nonverbal students is utilization of simultaneous communication through the use of signed English. Children are in the program six hours per day, five days per week.

MEASURES OF CHILD PROGRESS:

Rating scales, developmental checklists, behaviorally oriented recording sheets, and progress tracking systems (such as the RADEA and the Evaluation and Prescription for Exceptional Children) are used. The RADEA is used as a pre- and posttest, and the EPEC is used to check progress three times yearly. Standardized formal psychological testing includes the Stanford-Binet, Minnesota Preschool Scales, McCarthy, PPVT, Leiter, Bayley, WPPSI, Vineland, and VMI. A psychological test battery is administered to each child at program entry and termination.

PROGRAM FOR PARENTS:

Parents have access to periodic conferences with project staff, written materials, a professional library, and psychological therapy. Two training programs are offered: a basic course, offered twice yearly, is designed to familiarize the parents with basic behavior modification techniques; and advanced sessions, offered once each year, examine skill acquisition and teach the parents to teach the child. A parent newsletter is distributed regularly. Parent needs assessments are obtained twice yearly. Regular home visits are made in addition to training in the home with the family.

STAFF DEVELOPMENT:

Staff development activities include initial competency-based training to match job descriptions, continuing inservice training from professional staff and paraprofessionals (community volunteers), and weekly staff conferences with the project director and consultants.

PROJECT FOR EARLY EDUCATION OF EXCEPTIONAL CHILDREN (PEEEEC)

FISCAL AGENCY: West Kentucky Educational Cooperative

ADDRESS: Special Education Building
Murray State University
Murray, Kentucky 42071

PHONE: 502/762-6965
YEARS OF FUNDING: 3

PROJECT STAFF: Melba Casey & Bob Kibler, Co-Directors
4 Teachers, Parent Involvement Coordinator, 2 Teacher Aides, Secretary,
Paraprofessional

CHARACTERISTICS OF TARGET POPULATION:

Screening is provided for any child 2½ to 8 years of age. Enrollment priority is given to children (3 to 8) who have two or more handicaps and to those who cannot be served adequately through existing programs. High-risk children are also served.

PROGRAM FOR CHILDREN:

A diagnostic-prescriptive program provides an individualized educational plan for each identified child which is easily replicated, thereby making possible successful integration into public kindergartens and primary classrooms. Children are served in either the Developmental Learning Center or Home-School Instruction Program of the project.

MEASURES OF CHILD PROGRESS:

A comprehensive assessment as prescribed in the state regulations for each handicap is used to determine eligibility upon referral. Administered on a twice-yearly basis are the Project MEMPHIS Developmental Scale, LAP-D, Brigance, and Burk's Behavior Rating Scale.

PROGRAM FOR PARENTS:

A family needs assessment is conducted by the teacher to determine the parents' ability to (a) recognize and understand the child's handicap, (b) meet the basic needs of the child and family, (c) accept the child's handicap, and (d) participate in the child's educational program using appropriate intervention techniques. Based on the identified needs, a parent program is designed which may include home visits, transportation services, classroom observation, parent meetings, training and workshops, working in the classroom, teaching at home, advisory committee participation, and referral to services for assistance.

STAFF DEVELOPMENT:

Staff development needs are determined quarterly and are met through course work, individual development programs, and workshops. Emphasis is placed on the development of diagnostic prescriptive teaching and parent involvement skills for all staff, and on a general orientation to the project's activities and philosophy.

IDENTIFICATION AND MANAGEMENT OF
YOUNG HEARING IMPAIRED CHILDREN

FISCAL AGENCY: Brescia College, Hearing Impaired Project

ADDRESS: 718 Allen Street
Owensboro, Kentucky 42301

PHONE: 502/685-3133
YEARS OF FUNDING: 3

PROJECT STAFF: James L. Fitch, Director; Gene Ann Young, Coordinator
Audiologist, Teacher/Counselor, Service Coordinator

CHARACTERISTICS OF TARGET POPULATION:

The project serves 30 hearing impaired children, ages birth to 8.

PROGRAM FOR CHILDREN:

Services to children birth to 3 are provided in the child's home. The self-contained preschool classroom serves children ages 3 to 6. Services are also provided in nursery schools, public schools, and other settings which involve children whose hearing is normal. The curriculum is designed to meet individual needs in developmental areas.

MEASURES OF CHILD PROGRESS:

After entry into the program, and depending upon the child's age, the following instruments are utilized to measure progress: SKI-HI Outreach instruments (birth to 3), LAP-D (3 to 6), McCarthy, Key Math and PIAT (6-8), REEL (birth to 3), and Leiter International Performance Scale.

PROGRAM FOR PARENTS:

Parents are offered a planned informational program as well as opportunities for individual and group counseling. They are participants in home training and preschool activities.

STAFF DEVELOPMENT:

Weekly staff meetings are held for case review and programming for children. The administrative staff meets weekly for total project review. Consultants contribute to key phases of the project. Four major demonstration/dissemination conferences are scheduled for the current funding year.

SPECIAL FEATURES OF PROGRAM:

Special project features include adaptation of the LAP-D for young hearing impaired children and production of project manuals including: Identification and Hearing Screening, Family Involvement for Young Hearing Impaired Children, Diagnostic Procedures for the Young Hearing Impaired Child, Classroom Placement and Project Operations Manual.

USL PARENT-CHILD CENTER

FISCAL AGENCY: University of Southwestern Louisiana

ADDRESS: P.O. Box 3090, USL
Lafayette, Louisiana 70504

PHONE: 318/264-6186
YEARS OF FUNDING: 3

PROJECT STAFF: Frances P. Billeaud, Director; Luke Elliott, Coordinator
Educational Strategist, Speech Pathologist, Social Worker

CHARACTERISTICS OF TARGET POPULATION:

The project serves families of 50 preschool children (3-6 years of age) with handicapping conditions in the areas of communication, behavior, and education.

PROGRAM FOR CHILDREN:

Supplementary diagnostic testing for children is supplied when information from referring agency is incomplete; all children are administered the Developmental Profile pre- and post-management; videotaped segments of children's interaction with their parents are analyzed for use in management planning. Management is provided by the parents, who receive training in appropriate planning and implementation of individualized programs.

MEASURES OF CHILD PROGRESS:

A Competent Authority Special Education Evaluation is completed for each child prior to acceptance in the Parent-Child Center; if necessary, testing is supplemented by center staff to complete data in all areas prior to management. Alpern-Boll is obtained for all children upon entry and again at dismissal. The Competent Authority Special Education Evaluation is repeated once yearly for children enrolled; pre- and post-management data are compared. Weekly sets of data on child behaviors in specified areas are submitted by parents to staff during management; these data are analyzed by staff.

PROGRAM FOR PARENTS:

The parent education program is the primary thrust of this HCEEP project. It consists of a 10-hour training program in which all parents participate; instructional topics include normal development of children, variations thereof, communicative development, behavioral sequences and early academic learning, specific behavior management techniques, program planning, children's legal rights, and parental adjustment to having a handicapped child. Individual sessions follow with assigned staff members. IEPs are developed and implemented; enrollment time in this phase of the program varies.

STAFF DEVELOPMENT:

Staff development activities center primarily around increasing staff knowledge and skills in management areas. Since the staff turnover has been minimal during the project, little in-house training has had to be provided. Staff members share with each other what they have learned from local, state, regional and national professional meetings.

SPECIAL FEATURES OF PROGRAM:

This project has a color VTR cassette presentation about its operation. Contact director or coordinator regarding requests for usage. The project has also developed a parent change instrument to measure pre- and post-training information on areas in the program in which they participate.

OUACHITA PARISH EARLY CHILDHOOD PROJECT FOR THE HANDICAPPED

FISCAL AGENCY: Ouachita Parish School System

ADDRESS: 701 St. John Street
Monroe, Louisiana 71201

PHONE: 318/325-3002
YEARS OF FUNDING: 3

PROJECT STAFF: Wilma Gaines, Director
Social Worker, Speech Therapist, Teacher, Secretary, Aide, Bus Driver, Bus Attendant

CHARACTERISTICS OF TARGET POPULATION:

The project serves 12 preschoolers (3 to 5 years old) with a variety of handicapping conditions.

PROGRAM FOR CHILDREN:

Individualized prescriptive programming utilizes skills from the Teaching Research Curriculum and the Portage Guide to Early Education. Individual and group teaching sessions are conducted. Children are evaluated and instructed in the areas of language skills, social skills, and motor skills. The speech therapist provides additional services to those children with speech and language problems. This is a center-based program with children attending four hours a day, five days a week.

MEASURES OF CHILD PROGRESS:

During the first month of the program, children are pretested with the Teaching Research Curriculum Placement Test and the Portage Guide to Early Education. Posttests are given using these same instruments during the last month of the program. Children are tested individually whenever an item on their Individualized Education Program is completed.

PROGRAM FOR PARENTS:

Parent training sessions are held to teach skills that can be used at home. Visitation days are scheduled throughout the year and parents are encouraged to visit the classroom.

STAFF DEVELOPMENT:

Project staff attends inservice training sessions as determined by the needs assessment. Project staff visits other project sites to gather information on dissemination.

NEUROLOGY CHILDREN'S CENTER INFANT DEVELOPMENT PROGRAM

FISCAL AGENCY: Louisiana State University Medical Center

ADDRESS: 1100 Florida Avenue
New Orleans, Louisiana 70119

PHONE: 504/948-6881
YEARS OF FUNDING: 1

PROJECT STAFF: Stanley H. Abadie, Director; Patsy Poche, Coordinator
Special Educator, Social Worker, Teacher Assistant, Curriculum Specialist,
Secretary, Speech Pathologist, Physical Therapist, Pediatric Neurologist, Neuro-
psychologist, and Audiologist

CHARACTERISTICS OF TARGET POPULATION:

Twenty-six infants and toddlers (birth to 3) who are multihandicapped, orthopedically impaired, speech impaired, or retarded, and their parents are served by the program.

PROGRAM FOR CHILDREN:

A transdisciplinary team approach is used to provide programming for home- (birth-1½) and center-based (1½-3) populations. The intervention is based on six target areas: gross motor, fine motor, language, self-care, social/emotional, and cognitive. An eclectic educational framework is used to facilitate mother/child learning in all areas of the curriculum. Curriculum development by the educational team is an ongoing component of the program.

MEASURES OF CHILD PROGRESS:

The Bayley and the Early Intervention Developmental Profile are used in the initial evaluation and at regular intervals to monitor ongoing progress. Supplementary diagnostic tests include: the REEL, Sequential Inventory of Language Development, Fiorentino Reflex Inventory, Uzgis-Hunt, Stanford-Binet, Vineland, and DDST.

PROGRAM FOR PARENTS:

Center-based and home-based program parents are involved in a variety of experiences designed to facilitate their increasingly active participation as members of their child's therapeutic-educational team. Group educational sessions, individual parent training sessions, guided classroom observations, classroom participation, participation in IEP development and supportive services are offered to all parents. A parent manual is being developed for use in the project and for dissemination in the state of Louisiana.

STAFF DEVELOPMENT:

Weekly interdisciplinary staff meetings, conferences and workshops with consultants, site visits and participation in local, regional, and national professional meetings provide continuous inservice training for all staff members.

SPECIAL FEATURES OF PROGRAM:

The program is developing infant curriculum and parent training materials to be field tested on-site and disseminated throughout the state. The center will provide technical assistance to SEAs and LEAs in infant programming and training for systematic model replication. The program is utilized as a training site for university students in intervention-related fields such as special education, medicine, occupational therapy, physical therapy, and audiology and speech pathology.

ORLEANS MODEL FOR PRESCHOOL HANDICAPPED

FISCAL AGENCY: New Orleans Public Schools

ADDRESS: 703 Carondelet Street
New Orleans, Louisiana 70130

PHONE: 504/524-8592
YEARS OF FUNDING: 2

PROJECT STAFF: Edith Kong-Lam, Coordinator
Teacher Team Leader, Social Worker (part-time), Communication Disorders Specialist, 3 Teachers, 3 Teacher Assistants

CHARACTERISTICS OF TARGET POPULATION:

The project serves 12 to 22 developmentally handicapped children, 3 to 5 years, who are multihandicapped, developmentally delayed, or autistic. Settings include three self-contained classrooms in three local elementary schools in different school districts.

PROGRAM FOR CHILDREN:

The program follows the Developmental Task Instructional System (Lillie, 1975) assessing needs and establishing instructional objectives, curriculum activities, and learning systems. The curriculum is organized around these developmental areas: gross motor, fine motor, language, conceptual, perceptual, and social-emotional. The program operates five days a week for five hours per day. Auxilliary services are provided by consultants (e.g., physical therapist, occupational therapist).

MEASURES OF CHILD PROGRESS:

UPAS is used as a pretest and biannually as a cumulative indicator of child progress. Progress is recorded daily. The Brigance may be administered to individual children if deemed necessary.

PROGRAM FOR PARENTS:

The project emphasizes parent/family involvement. In addition to home visits, parents and child visit the program one or more times prior to enrollment. When a child enrolls, the parents and staff write an individualized contract for family participation, including these minimum requirements: weekly participation in the classroom, weekly or biweekly follow-up of preacademic exercises to be carried out at home, attendance at social events or workshops, and development of appropriate skills.

STAFF DEVELOPMENT:

Weekly staff meetings are used for case and project review and reports from staff who have attended conferences and workshops. Staff allots time monthly or bimonthly for inservice training or seminars. Materials and teaching techniques are demonstrated by experts. Discussions in problem areas result in teaching improvements and behavior management techniques as recommended by team leader and/or coordinator.

SPECIAL FEATURES OF PROGRAM:

Local university students participate in the program as student teachers.

EARLY EDUCATIONAL INTERVENTION AND
RESPONSIBLE PARENTING PROGRAM

FISCAL AGENCY: The Children's Guild, Inc., Baltimore City Public Schools

ADDRESS: The Children's Guild, Inc.
5921 Smith Avenue
Baltimore, Maryland 21209

PHONE: 301/542-3355
YEARS OF FUNDING: 3

PROJECT STAFF: Correan Baker, Director
2 Teacher-Therapists, 2 Child Care Aides, Social Worker, Secretary

CHARACTERISTICS OF TARGET POPULATION:

Eighteen emotionally "at-risk and vulnerable" and/or developmentally delayed children (1½ to 3 years) are served. Presenting problems include behavioral and/or emotional difficulties (as reported by the parent and corroborated or determined by a professional), abuse, neglect, risk due to parental stress of unrealistic expectations, and developmental delay. Priority consideration for enrollment is given to children reared by single parents, unwed mothers, or parents under age thirty.

PROGRAM FOR CHILDREN:

Comprehensive services are provided in a nursery learning area and "teaching apartment." The children receive structured and unstructured learning experiences two alternate mornings per week. They also receive therapeutic intervention in the home. Consultants from several disciplines work with the project staff to provide individual assessments and assist in the development and implementation of the IEP for each child. The curriculum is based upon the LAP.

MEASURES OF CHILD PROGRESS:

The following pre and post measures of child progress are used: LAP, Kohn Problem Checklist, HOME (Factors I, II, V), Vineland, Bayley, Merrill Palmer and/or Oseretsky Motor Scales. Parents complete a questionnaire regarding their child's behavior.

PROGRAM FOR PARENTS:

Parents are involved as partners in both the assessment and the therapeutic education of their child. Parent participation in training, counseling, and infant stimulation is considered the key component of the program. Individual counseling and family therapy are provided as needed.

STAFF DEVELOPMENT:

Staff members participate in conferences with project consultants and attend inservice training workshops and conferences within and outside of the Children's Guild, Inc.

SPECIAL FEATURES OF PROGRAM:

By focusing upon the single parent family, this program recognizes the phenomena of changing social structure, family constellations, and concepts of "normal" child influences. It provides a full range of services for both the handicapped infant and the parent in a setting which accommodates them together, psychologically and physically.

EARLY EDUCATION PROJECT (EEP)

FISCAL AGENCY: Montgomery County Public Schools (MCPS)

ADDRESS: Sandburg Learning Center
451 Meadow Hall Drive
Rockville, Maryland 20851

PHONE: 301/762-2611
YEARS OF FUNDING: 2

PROJECT STAFF: Vernon Behanna, Director; Barbara Hoffer, Coordinator
3 Teachers, 3 Instructional Aides, Speech Therapist, Occupational Therapist,
Physical Therapist, Parent Coordinator, Liaison Teacher

CHARACTERISTICS OF TARGET POPULATION:

The noncategorical program serves 30 mildly to moderately handicapped children (2 to 5) with varying strengths and needs.

PROGRAM FOR CHILDREN:

Child services are provided in two special centers operated by the Montgomery County Public Schools (MCPS): Sandburg Learning Center and Taylor Learning Center. Each of the three classrooms has an average of eight children with a teacher and an aide. The classrooms operate four and one-half days per week for four hours per day. An interdisciplinary team of therapists works with children individually and in small groups in the classroom and/or therapy room to provide a comprehensive program which considers the total child. The project staff collaborates with each child's parents to develop a detailed educational plan based upon the child's individual assessment. When a child is ready to leave the program, liaison and follow-up services are provided to insure a successful transition into less intensive educational settings within MCPS and the community.

MEASURES OF CHILD PROGRESS:

Within the first 30 days of entry and again at program exit, all children are measured on the Alpern-Boll and the LAP-D. At mid-year and at the end of the year, the California Preschool Social Competency Scale is administered. Additional instruments are used by the therapists for particular children.

PROGRAM FOR PARENTS:

A parent needs assessment is completed when the child enrolls. A parent coordinator designs and implements activities to respond to identified needs. School-based activities include participation in discussion and topical groups and training parents to work in the classroom. Home activities include home visits and home-school activity sheets for children.

STAFF DEVELOPMENT:

A competency-based staff development manual is completed by each staff member at the first of the school year to determine staff needs. One-half day each week is planned for staff development based on identified staff needs. Activities include: child staffings, interstaff consultation, home visits, development/implementation, inservice programs by and/or for on-site staff, and site visits.

SPECIAL FEATURES OF PROGRAM:

The George Washington University Special Education/Early Childhood Program works jointly with this MCPS project. The classrooms are used as training sites for graduate students and for high school students enrolled in child development classes.

COGNITIVE DEVELOPMENTAL INTERVENTION WITH
PRESCHOOL DISORDERED CHILDREN

FISCAL AGENCY: Language and Cognitive Development Center (LCDC)

ADDRESS: 11 Wyman Street
Boston, Massachusetts 02130

PHONE: 617/522-5434
YEARS OF FUNDING: 1

PROJECT STAFF: Arnold Miller & Eileen Miller, Co-Directors; Anita Louise Butcher, Coordinator; 5 Teachers, 10 Teacher Aides, 3 Clinical Psychologists, 3 Social Workers, 2 Social Work Students, Clinical Receptionist, Graduate Student, 2 Speech Therapists, 2 Consultants, Research Assistant, 2 Secretaries

CHARACTERISTICS OF TARGET POPULATION:

The target population consists of 50 children (2 to 6), 12 of whom are being followed during the first funding year. The children have no sensory or major physical defects but are characterized by major disturbances in some or all of the following areas: behavior organization, contact with the environment, social-emotional contact with adults, social-emotional contact with children, and communication. The children are most likely nonverbal, autistic and/or brain-injured.

PROGRAM FOR CHILDREN:

The program, which employs a cognitive-developmental approach, intervenes in each of the areas of disturbance with a year-round, center-based program operating 22½ hours per week. Five additional hours are spent weekly working in each child's home. The program uses a structured, individually designed curriculum concurrent with less structured psychotherapeutic interventions.

MEASURES OF CHILD PROGRESS:

The project systematically assesses each child with the aims of designing individualized intervention programs and later generating precise measures of development. Regular videotaping of each child provides ongoing evaluation. Traditional measures of development such as the Vineland, Bayley, Beiter-Engleman, Binet, PPVT and Metropolitan Readiness Test are used. Language tests such as the ACLC, ITPA and Carrow are used as appropriate. A project-developed observation scale, currently in the pilot stage, gives a profile of classroom functioning.

PROGRAM FOR PARENTS:

Mothers and/or fathers of enrolled children receive training in educational and psychotherapeutic techniques. They participate at the center for four hours per week, divided between training in the classroom under the teacher's direct supervision and participation in individual or group meetings.

STAFF DEVELOPMENT:

Initial staff training is supervised by the center directors. New staff members are required to spend 12 hours observing the children in classrooms and in less structured situations. Orientation manuals have been developed to help staff learn specific intervention techniques and underlying theories.

SPECIAL FEATURES OF PROGRAM:

This program will refine an existing curriculum and will develop a model program that can be incorporated within both public schools and specialized treatment centers.

SIDE BY SIDE

FISCAL AGENCY: Franklin County Educational Collaborative

ADDRESS: 359 Main Street
Greenfield, Massachusetts 01301

PHONE: 413/774-2243
YEARS OF FUNDING: 2

PROJECT STAFF: Dorothy Molnar & Barbara Carle, Co-Directors
2 Classroom Teachers, Assistant Teacher

CHARACTERISTICS OF TARGET POPULATION:

Eleven children from 3 to 6 years with moderate to severe handicaps are served in an integrated preschool setting with nine typical children aged 3 to 5. Handicapping conditions include cerebral palsy, spina bifida, epilepsy, and developmental delays.

PROGRAM FOR CHILDREN:

The program is dedicated to the principle of integrated education as the child's first school experience. The major goals are to foster a strong self-image, encourage independence in thought and action, and build positive relationships. The curriculum sources are Montessori and Mary Wood.

MEASURES OF CHILD PROGRESS:

Before program entry and again at the end of the school year, the Bayley is administered to children under 3, and the McCarthy is administered to children over 3. A standardized child development checklist is administered to the handicapped population at regular intervals during the school year.

PROGRAM FOR PARENTS:

Parents of both handicapped and nonhandicapped children participate in the parent program. The program gives parents an opportunity to support one another and to demonstrate acceptance of children with special needs. Activities include potluck meals at school, a weekly swim program, and bimonthly informal meetings. Parent-teacher conferences are held at least twice a year, and an hour is set aside each day when teachers are available to parents for telephone conferences. Parents are invited to visit the lending library and to observe in the classroom. A home-teaching program reflecting the concerns of parents of special children addresses topics such as education, health, and family welfare.

STAFF DEVELOPMENT:

Staff inservice activities focus on skills in behavior management, direct instructional techniques, and effective work with parents. Other inservice activities include visiting other sites, periodically evaluating staff, attending conferences and workshops, and consulting with other professionals.

RURAL EARLY ASSISTANCE TO CHILDREN (REACH)

FISCAL AGENCY: Massachusetts Department of Mental Health
Franklin/Hampshire Area Office

ADDRESS: Vernon St. School
Northampton, Massachusetts 01060

PHONE: 413/586-5762
YEARS OF FUNDING: 3

PROJECT STAFF: Burt Franzman, Director; Fred Fortin, Coordinator
Administrative Assistant/Intake Worker, Nurse, Speech Pathologist, Occupational Therapist, Physical Therapist, Early Childhood Specialist (.50), 2 Teachers, Secretary/Bookkeeper

CHARACTERISTICS OF TARGET POPULATION:

REACH has served over 100 handicapped or developmentally disabled children (birth to 3) who reside in the Franklin/Hampshire catchment area of western Massachusetts. The population includes children with significant delays in achieving developmental milestones, as well as children with visual, hearing, cognitive, and motor impairments. Children at biological or environmental risk are also followed and enter the program if serious delays are identified.

PROGRAM FOR CHILDREN:

The program for children includes: (1) developmental assessment/evaluation by a transdisciplinary team; (2) weekly home visitation based on educational goals established with the parent; and (3) weekly parent-cooperative, integrated play group sessions.

MEASURES OF CHILD PROGRESS:

The Bayley and the University of Michigan Early Intervention Developmental Profile are used as measures of child progress. Other evaluations are made as needed, and parent and staff observations are incorporated into the decision-making process. Assessments are completed four to six weeks after intake. Objectives and the Profile are reviewed and updated quarterly. The Bayley, additional assessments, and Family Service Plan are updated annually.

PROGRAM FOR PARENTS:

Parental needs assessment, educational and support services during home visitation/play group, and periodic group meetings constitute the parent program. The program emphasizes father participation. The staff helps parents obtain supplementary services and provides assistance when the child transfers to the public school program at age 3.

STAFF DEVELOPMENT:

Through a needs assessment, staff needs are priority-ranked and semiannual goals are determined. Consultants and staff provide monthly inservice training. Staff development emphasizes skill development and sharing, peer group supervision, and one-to-one consultation with the Direct Services Coordinator. Semiannual retreats provide the opportunity to examine project goals, progress, and plans.

DETROIT'S PRESCHOOL PUPIL/PARENT/PROFESSIONAL READINESS PROJECT

FISCAL AGENCY: Detroit Public Schools

ADDRESS: 5057 Woodward Ave., Rm. 1016
Detroit, Michigan 48202PHONE: 313/494-1634
YEARS OF FUNDING: 1

PROJECT STAFF: Beverly J. Johnson, Director; Sharon K. Finnerty, Coordinator; Primary A Class Teacher, Developmental Preschool Class Teacher, Primary A Class Special Education Aide, Developmental Preschool Special Education Aide, Secretary

CHARACTERISTICS OF TARGET POPULATION:

Twenty educable mentally impaired (EMI) pupils (3-7) typifying the health, socioeconomic, educational, and cultural problems of the school district are served by the project.

PROGRAM FOR CHILDREN:

The project operates two classrooms, one serving children ages 3 to 5, and the other serving children ages 5 to 7. Both classrooms are located in the same building as Head Start to facilitate mainstreaming with nonhandicapped peers. Language and reading skills are developed through the language experience approach. Duplicated copies of child-created stories are sent home regularly for parent review and expansion.

MEASURES OF CHILD PROGRESS:

Entering children are assessed during a 3-week period at Detroit's Observational Prescriptive Center. Classroom progress in basic skills is measured by objective-referenced tests which are developed by the teacher and based upon curriculum content. Primary level students participate in city-wide achievement testing, while younger children receive the Developmental Preschool Assessment Scale.

PROGRAM FOR PARENTS:

Parent education workshops are held monthly to discuss such topics as school placement and IEP development. Parents observe in the classrooms and may serve as aides. Training is provided in reinforcing their child's language experience stories. Parents serve on the Advisory Council and the Parents Guild, an input group to staff.

STAFF DEVELOPMENT:

Staff receives preservice and inservice training in the program's components, especially curriculum design and parent involvement. Attendance at workshops and conferences is encouraged. Parents and families participate in many of the staff inservice sessions.

INFANT AND PRESCHOOL SPECIAL EDUCATION PROGRAM (IPSEP)

FISCAL AGENCY: Plymouth-Canton Community Schools, Pupil Personnel Services

ADDRESS: 41400 Greenbriar Lane
Plymouth, Michigan 48170

PHONE: 313/420-0373
YEARS OF FUNDING: 3

PROJECT STAFF: Mary Edith Campbell, Director
Speech/Language Pathologist, Center Teacher, Home Program Coordinator,
Registered Physical Therapist, Registered Nurse, 3 Home Programmers, Occupational Therapist Registered, Psychologist, Social Worker

CHARACTERISTICS OF TARGET POPULATION:

The program serves 90 children (birth to 6) who are eligible for special education programs under any categorical area or for whom an existing special education program is not available or appropriate. The target group is drawn from the Plymouth-Canton Community Schools.

PROGRAM FOR CHILDREN:

Handicapped children are grouped categorically for delivery of service through developmentally based learning activities at home or at the school/center base. There are four service components: (1) the Home Program, conducted in the home one hour weekly, involves paraprofessionals who instruct parents in teaching skills under the supervision of the team leader; (2) Classroom at the Center utilizes team-teaching by the teacher, speech pathologist, physical therapist, and occupational therapist, all working to meet each child's individual needs; (3) Infant/Toddler Intervention Group is held twice monthly for one hour for children birth to 3 and their parents, under the direction of the physical therapist, occupational therapist, speech pathologist, psychologist, and social worker; and (4) Individual Therapy Program, offered from September to June, is conducted by the physical and occupational therapists and the speech pathologist.

MEASURES OF CHILD PROGRESS:

The Early Intervention Developmental Profile and the Denver Developmental Profile are used as pretests. Other testing can include the Sequenced Inventory of Communication Development, Bankson Language Screening Test, Photo Articulation Test, Test of Auditory Comprehension of Language, and McCarthy. Individual physical status assessments are also performed. Tests are administered twice each year.

PROGRAM FOR PARENTS:

In addition to providing the parent-teaching program in the home, families are offered the opportunity for individual or group instruction, small group interest meetings, coffee sessions, special project meetings, and evening educational series which address their particular needs and concerns. Active participation and observation within the classroom and at individual sessions are also stressed.

STAFF DEVELOPMENT:

Emphasis is directed toward increasing the staff's technical knowledge and skills and their ability to work as a team. Ideas and materials obtained through staff participation in disability meetings are shared at weekly staff meetings.

THE EARLY INTERVENTION PROGRAM

FISCAL AGENCY: Wayne Westland Community Schools

ADDRESS: Wilson School
1225 Wildwood
Westland, Michigan 48185

PHONE: 313/722-3232
YEARS OF FUNDING: 2

PROJECT STAFF: Elizabeth Cromwell, Director
Evaluation Specialist, Staff Development Coordinator, 5.5 Teachers, Occupational Therapist, Physical Therapist, 4 Consultants, Psychologist, Social Worker, 4.5 Paraprofessionals

CHARACTERISTICS OF TARGET POPULATION:

The project serves handicapped children (3 to 5) who reside in the school district. Included in the classes for these children are nine peer models (non-handicapped 3- to 5-year-olds).

PROGRAM FOR CHILDREN:

Children attend class five half-days a week in a public school setting. The open classroom provides flexible instructional management with individuals, small- and large-group activities. Home visits are also made once or twice a month depending on the needs of the child and/or family.

MEASURES OF CHILD PROGRESS:

Upon referral, the Zimmerman Preschool Language Scale and the Developmental Activities Screening Inventory are administered. The parents are interviewed by the social worker to obtain a developmental history. If a child is eligible for the program, he is enrolled in a classroom and the LAP is completed. Parts of the LAP are readministered throughout the year to determine whether individual objectives have been met. The complete LAP is administered as a posttest. Psychologicals are given as necessary.

PROGRAM FOR PARENTS:

The major focus of parent work is semimonthly home visits in which parents are assisted in home instruction techniques and given ongoing feedback about their child's progress. Once a week, the parents are invited to the classroom for a Parent's Day Program. Topics discussed might include child-rearing techniques, nutrition and health issues, language development, or behavior management. In addition, monthly programs for parents provide opportunities to socialize with other parents of handicapped children and to obtain information on topics specifically related to special education, such as Down's syndrome, sibling relationships for the handicapped child, and legal rights.

STAFF DEVELOPMENT:

Needs assessments are completed by each staff member in September and January, and programs are planned for inservice training. Staff development also is provided through attendance at local and state workshops, seminars and conventions. A library of professional materials is available for project staff.

PROJECT ENFOLD

FISCAL AGENCY: St. Paul Public Schools

ADDRESS: Roosevelt Elementary School
East Congress & Greenwood Avenue
St. Paul, Minnesota 55107

PHONE: 612/224-7644
YEARS OF FUNDING: 3

PROJECT STAFF: Sharon Cox, Director; Cheryl Meyers; Coordinator
4 Teachers, 3 Home-based Staff, Registered Occupational Therapist, Speech Clinician, 4 Assistants, Nurse

CHARACTERISTICS OF TARGET POPULATION:

The project serves preschool-aged children (birth to 5 years) displaying significant developmental delays.

PROGRAM FOR CHILDREN:

Children birth to 1½ years are served by a home-based program staff consisting of a teacher, occupational therapist and nurse. Children 1½ to 5 years are served in a classroom program four days per week, with the fifth day used for home visits. A cognitive developmental approach is employed. Major areas of emphasis are communication, social, self-care, motor and cognitive skills.

MEASURES OF CHILD PROGRESS:

An adapted LAP is the classroom assessment tool. Additional assessments by the occupational therapist and speech clinician are completed on those children in need.

PROGRAM FOR PARENTS:

Parent activities are based on a parent needs assessment. Home visits are conducted and suggestions given for specific home activities. Parent meetings, observation of the classroom, parent-child field trips, and specific parent instruction in a variety of areas are other activities available to the parents.

STAFF DEVELOPMENT:

Inservice training consists of instruction in screening, assessment, language development, motor development and parent involvement.

RESOURCE UTILIZATION THROUGH REGIONAL AGENCY LEADERSHIP
(PROJECT RURAL)

FISCAL AGENCY: Speech and Hearing Center, Mississippi University
for Women

ADDRESS: Box W-1340
Mississippi University for Women
Columbus, Mississippi 39701

PHONE: 601/328-9657
YEARS OF FUNDING: 2

PROJECT STAFF: Francis A. Griffith, Director
Language Specialist, Educational Audiologist, 2 Teachers, 2 Teacher Aides
(Graduate Students), Clinical Audiologist

CHARACTERISTICS OF TARGET POPULATION:

The project serves (1) eight to 12 children from birth to 8 years with bilateral hearing loss which is not resolvable by medical and/or surgical treatment alone and which would prevent the normal acquisition of speech and language, and (2) 10 to 12 birth to 8-year-old children with documented language delay or disorder and/or general developmental delay with normal hearing limits bilaterally.

PROGRAM FOR CHILDREN:

The children are in class three hours a day, five days a week. The classroom for hearing impaired operates on an experienced-based model of speech and language stimulation. The class for language impaired operates on a total child interactive model of language development. For both classes, curriculum elements include individual and group speech/language training, gross motor training, perceptual motor training, and cognitive preacademic skill areas.

MEASURES OF CHILD PROGRESS:

Audiological evaluations, teacher and parent observations, and spontaneous language samples are used as measures of child progress.

PROGRAM FOR PARENTS:

Parents are provided opportunities for hearing aid orientation, observations, training activities, participation in selected classroom activities, and individual and/or group parent counseling. The parents have access to observation, training, and teacher assistance during the daily class meeting time. Parent counseling is suggested by staff on the basis of observations or is provided at the request of one or both parents.

STAFF DEVELOPMENT:

Initial staff development activities included an orientation to local cooperating agencies, and to the project's procedures, goals and objectives. Inservice workshops have been prepared during Phase 2 and will continue during Phase 3.

SPECIAL FEATURES OF PROGRAM:

As a first step toward satisfactory integration with nonhandicapped children, the two preschool classes are integrated for certain activities on a regular basis.

SEQUENTIAL TRAINING EXPERIENCES IN THE PSYCHOMOTOR DOMAIN
(PROJECT STEP)

FISCAL AGENCY: Meridian Public Schools

ADDRESS: 1015 25th Avenue
Meridian, Mississippi 39301

PHONE: 601/483-6271
YEARS OF FUNDING: 3

PROJECT STAFF: William J. Sadka, Director; JoAnn Corley, Coordinator
Center-based Learning Coordinator, 3 Teacher Aides, Parent Trainer

CHARACTERISTICS OF TARGET POPULATION:

The project serves trainable and lower educable handicapped children, ages 4 to 8 years.

PROGRAM FOR CHILDREN:

This program provides learning experiences to enhance the development of movement skills which integrate the cognitive, affective, and psychomotor domains. Project STEP, through a sequential task-learning process, assists handicapped children in becoming more successful in managing their bodies in a wide variety of internal and external stimuli. Children are provided with tasks appropriate for each maturation and readiness level in order that increasingly more complicated motor activities may be accomplished.

MEASURES OF CHILD PROGRESS:

The STEP Psychomotor Inventory Continuum is administered as pre- and posttests to evaluate student performance.

PROGRAM FOR PARENTS:

Parents work with the staff in determining the handicapped child's psychomotor developmental functioning level and receive training to continue the sequential training program with their children. In addition to the regular parent program, a parent lab has been added to help parents learn about various handicapping conditions and motor skill development. Also, videotapes are used to demonstrate the children's weaknesses to parents in order for them to better support the program in the home.

STAFF DEVELOPMENT:

Inservice and workshop training is provided in order that staff acquire the necessary competencies to implement the sequentially developed training program for handicapped children.

SPECIAL FEATURES OF PROGRAM:

Project STEP provides training for teachers and other persons interested in the child's psychomotor domain.

EARLY INTERVENTION PROGRAM

FISCAL AGENCY: The Curators of the University of Missouri

ADDRESS: Dept. of Special Education
515 S. Sixth Street
Columbia, Missouri 65211

PHONE: 314/882-3741
YEARS OF FUNDING: 2

PROJECT STAFF: Sandra W. Gautt, Director; Ruth Friar, Coordinator
Classroom Managers, Home Interventionist, Community Liaison, Speech/Language Pathologist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 18 children between 10 months and 5 years of age who have exhibited a significant delay in one or more areas of development and/or who have been identified as having a known syndrome or high-risk characteristics which result in a high incidence of learning and/or behavior problems.

PROGRAM FOR CHILDREN:

Individual educational programs are based upon data obtained through criterion-referenced assessments and systematic observational techniques, using various curricula including Teaching Research. Instructional programming is implemented through a data-based management system. Program options include four half-day sessions per week in a self-contained or integrated classroom model, instructional home visits on a weekly basis supplemented by monthly visits to the center, and instructional and/or behavioral support programming provided to children enrolled in community day care and preschool programs through a technical assessment model. Ancillary services are provided by consultants from other departments in the university and/or community agencies.

MEASURES OF CHILD PROGRESS:

Child progress is evaluated using both norm- and criterion-referenced measures. The Bayley or the McCarthy is administered upon program entry, at 6-month intervals, and upon leaving the program. A multiple baseline design based upon daily performance data gathered on selected instructional programs is used to obtain continuous progress data.

PROGRAM FOR PARENTS:

Parents participate in all aspects of the program: assessment, planning, intervention in the home and center, decision making, and program evaluation. Parent education and training are provided by the staff through individual sessions and monthly parent meetings. Parental and family needs are assessed by the community liaison teacher, and an individualized plan is developed for meeting these needs.

STAFF DEVELOPMENT:

Following an initial orientation session, continuous inservice programming is based upon assessments of individual and group needs. Weekly meetings focus on project implementation and review, dissemination of information gained from individual staff development activities, and designated staff development programs. A professional library is maintained, and other resources are available from university departments.

COMPREHENSIVE SERVICES FOR RURAL HANDICAPPED YOUNG CHILDREN

FISCAL AGENCY: Springfield Regional Center for the Developmentally Disabled

ADDRESS: P.O. Box 5067
Springfield, Missouri 65801

PHONE: 417/869-0574
YEARS OF FUNDING: 3

PROJECT STAFF: Louise Stefanowicz, Director
Psychologist, Physical Therapist, Occupational Therapist, Speech Therapist,
Special Educator, Social Worker

CHARACTERISTICS OF TARGET POPULATION:

The project serves 70 children (birth to 5) and their parents in a 15-county rural area of southwestern Missouri. Handicapping conditions range from mild to severe.

PROGRAM FOR CHILDREN:

Each child receives an individualized education program to be carried out by parents at home. Center-based weekly groups and biweekly home visits provide staff consultation for the parents. Five satellites established in rural areas of the 10,000-square-mile catchment area provide group programs for children who live far from the center.

MEASURES OF CHILD PROGRESS:

All children receive a multidisciplinary initial evaluation consisting of (1) psychological, educational, speech and language, and motor assessment; and (2) nutritional and audiological screening. Pediatric and neurologic consultation is available. Evaluations are repeated annually and when the child leaves the program. Instruments include the Bayley, Stanford-Binet, Hiskey-Nebraska, REEL, Mecham, SICO, Peabody, Arizona Articulation Proficiency Scale, Vineland, Hoskin Squires, and Bayley Motor. The child's IEP is updated and reviewed every three months through administration of the Early Intervention Developmental Profile or the Portage Checklist.

PROGRAM FOR PARENTS:

Parents participate in every part of the program as primary therapists for their children. They carry on treatment at home and in groups under staff supervision. Training is conducted during home visits, group sessions, and in quarterly parent meetings.

STAFF DEVELOPMENT:

Inservice training, provided by staff and outside consultants, is carried out according to an annual needs assessment. Each staff member is expected to attend at least one national conference on topics relevant to the project. Annual retreats are held for program evaluation and planning. In addition, staff meetings and case reviews are held weekly.

SPECIAL FEATURES OF PROGRAM:

Satellite development in small rural towns is a special feature of this project. The project provides training for other area professionals in assessment and programming for young handicapped children. The project has received 262 referrals in two years.

PROJECT IMPACT

FISCAL AGENCY: Family Resource Center

ADDRESS: 3930 Lindell Boulevard
St. Louis, Missouri 63108

PHONE: 314/534-9350
YEARS OF FUNDING: 2

PROJECT STAFF: Phyllis Rozansky, Director; Virginia R. Klaus, Coordinator
2 Education Therapists, 2 Family Therapists, 2 Education Assistants, Diagnostician, Driver

CHARACTERISTICS OF TARGET POPULATION:

The project is capable of serving 20 children, 10 in each classroom session. It is designed for 2½- to 5-year-old children with either developmental delays or behavior problems whose parents are willing to commit themselves to an hour of parent training per week. Families are referred to the agency because of actual or potential child abuse and/or neglect.

PROGRAM FOR CHILDREN:

Children attend a daily, 3-hour session in a therapeutic classroom. Children undergo an extended diagnostic assessment, including a detailed hearing examination. The subsequent IEP is implemented in the therapeutic classroom. A randomized observational schedule is maintained as a basis for reports in the Children's Progress Form. Reassessment is conducted at 6-month intervals. The classroom curriculum is a therapeutic-developmental program with special emphasis in the emotional-social area, where clients experience significant problems and delays.

MEASURES OF CHILD PROGRESS:

The instruments used for screening or baseline, progress, and posttesting include the DDST, PPVT, McCarthy, Preschool Language Scale, VMI, Preschool Behavior Questionnaire, and Children's Progress Form.

PROGRAM FOR PARENTS:

Parents are committed to a weekly one-hour parent-child training session in a simulated home environment in which interaction skills are practiced and videotaped for review. Social and informational parent-staff sessions are scheduled, and parents participate on the Project Advisory Board.

STAFF DEVELOPMENT:

Staff members are involved as presenters and participants in six 3-hour sessions of a professional seminar and in agency-wide inservice training.

PRESCHOOL SERVICES FOR HANDICAPPED CHILDREN IN RURAL AREAS
(PROJECT SUNRISE)

FISCAL AGENCY: Eastern Montana College

ADDRESS: Institute for Habilitative Services
1500 N. 30th Street
Billings, Montana 59101

PHONE: 406/657-2250
YEARS OF FUNDING: 3

PROJECT STAFF: Ronald P. Sexton, Director; Kay P. Walker, Coordinator
2 Special Educators

CHARACTERISTICS OF TARGET POPULATION:

Twenty-seven mildly to severely handicapped preschool children (birth to 6 years) within a 12-county region are eligible for services through Project Sunrise.

PROGRAM FOR CHILDREN:

Service delivery is accomplished through a home-based parent training model. Home visitors, trained and supervised by project special educators, make weekly visits to the homes of participating families to review progress, collect data and monitor programs. Multidisciplinary consultants are available through various agencies within the region.

MEASURES OF CHILD PROGRESS:

The Alpern-Boll is administered when a child enters the program and thereafter every six months. UPAS is administered quarterly in assessing preacademic and communication programs. The Curriculum and Monitoring System (CAMS) is administered quarterly in assessing self-help skills, social/emotional development and motor skills.

PROGRAM FOR PARENTS:

Parents receive individual training to assist them in becoming a more effective teachers of their handicapped children. In addition to regular home visits, parents have the option of training at one of two demonstration sites, located in Billings and Lewistown.

STAFF DEVELOPMENT:

In addition to their own participation in local, regional and national workshops and conferences, project special educators provide orientation, preservice and ongoing inservice training for project home visitors.

SPECIAL FEATURES OF PROGRAM:

In addition to services previously described, Sunrise conducts special education workshops and training sessions for a variety of audiences. Sunrise has also become a resource for students in the field of early childhood special education.

SEEK OUT AND SERVE (S.O.S.)

FISCAL AGENCY: Educational Service Unit #9

ADDRESS: P.O. Box 2047
Hastings, Nebraska 68901

PHONE: 402/463-5611
YEARS OF FUNDING: 3

PROJECT STAFF: Polly Feis, Director; Ginny Locke, Coordinator
Physical Therapist, Deaf Educator, 3 Speech/Language Pathologists, 2.5 Early Childhood Special Education Teachers, 2 Paraprofessionals, Diagnostic Nurse (.05), Pediatrician (.03), Psychologist (.15), Social Worker (.10), Foster Grandmother

CHARACTERISTICS OF TARGET POPULATION:

Eligible children (birth to 5 years) are those who are not presently receiving services and who, by multidisciplinary diagnostic procedures, are determined to demonstrate a handicapping condition according to the criteria for verification established by the state of Nebraska. Children reside in a 5½-county area of rural Nebraska covering 3,000 square miles. Program settings include preschool classrooms (serving 25), aphasic clinic (10), combination home/center (5), and home (35).

PROGRAM FOR CHILDREN:

Medical, psychological, social, and educational assessments are used to identify all developmental needs of the handicapped child and to determine appropriate individual treatment programs. Home-based service focuses on teaching parents to carry out the treatment objectives. Children (3 to 5) needing a more intensive treatment program are served by a center-based program which emphasizes the development of communication, self-help, and social skills. Support staff includes a deaf educator, a physical therapist, a diagnostic nurse, and a pediatrician. Parents participate in the classroom as volunteers.

MEASURES OF CHILD PROGRESS:

Screening instruments used are the DDST, Alpern-Boll, and Denver Articulation Screening Exam. Diagnosis is done by the interdisciplinary diagnostic team of ESU #9. The LAP is used as a pre- and posttest of the child's overall development. In addition, the centers use the PPVT, the Sequenced Inventory of Communication Development, and the Milani-Comparetti. Each member of the diagnostic team uses instruments appropriate for their area and the child's handicapping condition.

PROGRAM FOR PARENTS:

In addition to training in child treatment and management and as a volunteer in the center, parents complete a needs assessment to assist staff in determining other needs to be met by the program. Group workshops are conducted by project staff and/or outside consultants.

STAFF DEVELOPMENT:

Bimonthly, small group staff meetings are used for case and project review. Monthly total staff meetings are used for reports from staff who have attended conferences, workshops, and classes. Also, parent and staff needs are reviewed and plans developed or confirmed to meet these needs. Inservice training is planned on a bimonthly basis. Other specific training occurs as the need or opportunity arises.

COMMUNITY RESOURCES IN THE EDUCATION OF
EXCEPTIONAL PRESCHOOLERS (CREEP)

FISCAL AGENCY: Camden Board of Education

ADDRESS: Davis School
34th and Cramer Streets
Camden, New Jersey 08105

PHONE: 609/541-1181
YEARS OF FUNDING: 3

PROJECT STAFF: Olive Smith, Director
Family Treatment Specialist, Clerk, 2 Aides, Teacher, Physical Therapist (part-time), Speech Therapist (part-time), Educational Consultant, Bus Driver, Family Liaison Worker (part-time), 3 CETA Workers (2nd classroom staff)

CHARACTERISTICS OF TARGET POPULATION:

The project serves 25 severely handicapped children, ages birth to 6. It provides referral, consultation, and interagency services to any family in the community, even if the child is served by another program.

PROGRAM FOR CHILDREN:

The project emphasizes a developmental approach (Piagetian) and the use of behavioral techniques. The curriculum addresses self-help, communication, cognitive-sensory stimulation, motor skills, socialization, and recreation. An education center offers suitable programs for up to 10 children per class. Schedules for children vary from one to four half-days per week. Some youngsters are served at home only, and others may receive the combined services of agencies.

MEASURES OF CHILD PROGRESS:

Measures of child progress include the Bayley, LAP, PPVT, REEL, Koontz, Portage Project Checklist, Vineland, and a physical therapy developmental evaluation.

PROGRAM FOR PARENTS:

Staff members train parents to deal with inappropriate behaviors, verbalization, and motor activity, and provide information about special equipment for home-care problems. Training is available in lifting, moving, and positioning children, and in realistic planning for the future. Inservice programs are provided monthly.

STAFF DEVELOPMENT:

Weekly staff meetings are held to assist with IEPs, and define related issues. Consultants, the project director, and others provide inservice training.

SPECIAL FEATURES OF PROGRAM:

The program employs CETA-funded high school seniors in the project classroom as well as a parent liaison worker who provides special help with the cultural and language differences of Spanish-speaking families. The project, which uses a training model with planned objectives, serves as a training site for college students and has been responsible for inservice activities with both LEA staff and outside agencies. The program has been replicated in a classroom for the multiply handicapped under state VI-B funding.

PRESCHOOL SUPERMARKET

FISCAL AGENCY: Glassboro State College

ADDRESS: Bozorth Early Childhood Center
Glassboro, New Jersey 08028

PHONE: 609/445-6285
YEARS OF FUNDING: 1

PROJECT STAFF: Barbara A. LoPresti, Director; Geraldine W. Scott, Assistant Director, 2 Head Teachers, 2 Assistant Teachers (part-time), Secretary

CHARACTERISTICS OF TARGET POPULATION:

Twenty-four to 30 children from birth to 4 are enrolled. Children with all types of handicapping conditions are accepted from all socioeconomic classes and geographic settings in South Jersey.

PROGRAM FOR CHILDREN:

Five program delivery strategies are available: (1) an integrated classroom program which includes almost equal numbers of handicapped and nonhandicapped children is offered three mornings per week for 2½ hours; (2) an intensive specialized services program for more severely handicapped children who cannot be integrated into a larger classroom is offered twice a week for 1½ hours; (3) an integrated play group meets for 1½ hours one day a week; (4) a home-based program is provided for children who cannot be transported to the center, or who are best served at home; and (5) the Preschool Family Resource Center for the Handicapped provides direct training for parents, siblings, and grandparents through a workshop series and lending library. The decision regarding placement into any or all of the educational delivery strategies is made cooperatively with equal consideration given to both the needs of the child and the needs and desires of the parent(s).

MEASURES OF CHILD PROGRESS:

The following measures are used as initial evaluation instruments and/or ongoing assessment instruments: pediatric developmental evaluation, Houston Speech and Hearing Center Summary of Screening Assessment of Educational Needs (birth to 3 scale or 3 to 6 scale), LAP, classroom observation, and three project-developed instruments (a tool for developmental screening, a gross motor scale, and a speech and language scale).

PROGRAM FOR PARENTS:

The parents are actively involved with all program activities from the initial screening and assessment to the final evaluation of their child's progress. Activities specifically designed to meet individual and family needs evolve from parent questionnaires and concerns articulated in a Family Educational Plan.

STAFF DEVELOPMENT:

Staff builds expertise as needed through peer and consultant supervision, on-site visitation, and workshops which provide training in intervention techniques.

COGNITIVE LINGUISTIC INTERVENTION PROGRAM (CLIP)

FISCAL AGENCY: Montclair Board of Education

ADDRESS: 22 Valley Road
Montclair, New Jersey 07042

PHONE: 201/783-4000
YEARS OF FUNDING: 2

PROJECT STAFF: Mary C. Vernacchia, Director
Learning Disabilities Teacher/Consultant, 2 Speech-Language Pathologists,
Parent/Staff Training Specialists, Evaluator

CHARACTERISTICS OF TARGET POPULATION:

Thirty-five children (4 to 6) who demonstrate risk of cognitive disabilities in the area of language have been selected from the Montclair Public School population to receive direct services by CLIP specialists. Outreach inservice training is provided for parents and teachers of 2- and 3-year-old children in community agencies.

PROGRAM FOR CHILDREN:

The goal of the program for children is to facilitate cognitive and language development. A combination of center-based (3½ to 6 years), home-based (2 to 4 years), and community-based (2 to 4 years) programs provides the settings for implementing services for children. In both center-based and community-based programs, handicapped children are integrated with nonhandicapped children. Children (2 to 3½) who are not enrolled in a group situation are served at home. Diagnosis and assessment are provided by the Psycho-Education Center, Montclair State College, and CLIP staff.

MEASURES OF CHILD PROGRESS:

The identification and assessment devices used are the Preschool Language Assessment Instrument and the Criterion-Referenced Inventory of Developmental Tasks (developed by the Montclair Public Schools). The Inventory of Developmental Tasks is used as a pretest, three months later as a pre-intervention test, and lastly as a posttest.

PROGRAM FOR PARENTS:

The overall objectives of parent participation are to acquaint the parents and family with concepts of child development, to increase their understanding of the child's handicap, and to develop effective coping skills to handle behavior. Family activities include workshops, individual and group conferences, classroom participation, lectures, films, and videotapes. Home visits are conducted by CLIP specialists when appropriate.

STAFF DEVELOPMENT:

Inservice training includes a comprehensive orientation program, workshops, and individual and small group consultation for teachers in the public schools and community agencies.

SPECIAL FEATURES OF PROGRAM:

The program is a collaborative effort by the Montclair Board of Education and Montclair State College. Project CLIP is a field training site for students majoring in speech-language pathology and learning disabilities. CLIP offers a 6-week summer language program to provide a continuous learning experience for target children.

ALBUQUERQUE SPECIAL PRESCHOOL INTEGRATION PROJECT

FISCAL AGENCY: Albuquerque Special Preschool

ADDRESS: 3501 Campus Boulevard, N.E.
Albuquerque, New Mexico 87106

PHONE: 505/266-8811
YEARS OF FUNDING: 2

PROJECT STAFF: Marilyn Price, Director

4 Teachers, 3 Classroom Aides, Client Services Coordinator, Occupational Therapist, Evaluation Coordinator, Speech Therapist, Administrative Assistant for Dissemination, Secretary

CHARACTERISTICS OF TARGET POPULATION:

Sixteen moderately retarded/developmentally delayed children (3 to 5 years) who may also have chronic health problems and/or sensory deficits are served with 22 nonhandicapped children (2 to 4 years) who do not exhibit developmental delays.

PROGRAM FOR CHILDREN:

Three integrated classrooms (one affiliated with a regular preschool) are team-taught by special education teachers and early childhood educators. Teams of two teachers train one another in their respective skill areas so that each will be able to handle an integrated class with only the assistance of an aide. Two of the classrooms serve approximately 10 children each, with a 1:1 ratio of handicapped to nonhandicapped children; the third class serves 18 children, with a 1:2 ratio of handicapped to nonhandicapped children. Utilizing a developmentally sequenced curriculum approach, the teachers focus on language and social skills of the children, and on the use of nonhandicapped children as peer models.

MEASURES OF CHILD PROGRESS:

The Alpern-Boll is administered to all children as a pre and post measure. The LAP is also administered to the handicapped children quarterly as a teaching and an assessment tool. Language development is assessed by pre- and posttesting using the REEL and/or the PPVT. Extensive research is being conducted on the play behavior of children in an integrated setting. Data are being taken on the level of play in which children engage, the time spent in each level, the degree to which children initiate interactive play, and whether handicapped and nonhandicapped play with each other.

PROGRAM FOR PARENTS:

Goals for parents are to increase the awareness and acceptance of handicapping conditions and to improve parental skills and attitudes which relate to the handicaps of children. Attitudinal changes are assessed through pre- and posttesting using the Attitude Toward Handicapped Individuals Survey and/or a Q-Sort instrument. Parents receive newsletters, are invited to attend workshops designed to meet their needs, and are asked to regular conferences with their child's teacher.

STAFF DEVELOPMENT:

Teachers in elementary/early childhood education and special education train one another to work with both handicapped and normal children. Inservice programs, site visits, and staff input are part of the total program for staff development.

ACOMA EARLY INTERVENTION PROJECT

FISCAL AGENCY: Pueblo of Acoma

ADDRESS: Box 307 PHONE: 505/552-6621
Pueblo of Acoma, New Mexico 87034 YEARS OF FUNDING: 3

PROJECT STAFF: Marilyn J. Gorospe, Director; Rhonda C. Chino, Coordinator
2 Home Visitors, 2 Day Care Workers

CHARACTERISTICS OF TARGET POPULATION:

Nine handicapped children are served, with various handicapping conditions such as Down's syndrome, Lowe's syndrome, hydrocephaly and cerebral palsy. All Acoma handicapped children from birth to 5 years of age are served in the Acoma Early Intervention Project.

PROGRAM FOR CHILDREN:

Children are served in center-based or home-based programs or both. Opportunities for mainstreaming exist in the day care centers. Keresan, the Acoma language, is used in providing educational services. Data are taken on a daily basis by using anecdotal and charting procedures. The LAP is used for development of IEPs, along with parent and staff input.

MEASURES OF CHILD PROGRESS:

The Portage is used on an ongoing basis. The Alpern-Boll is administered on an annual basis. Psycho-educational evaluations are completed on each child on an annual basis.

PROGRAM FOR PARENTS:

The parents participate in the delivery of services by providing input relative to their child's educational program. Input from parents helps to determine the type of information and training they wish to receive. The parent group meets at least once a month. Two parents serve as Advisory Council members.

STAFF DEVELOPMENT:

Inservice training is provided on an ongoing basis to the professional and paraprofessional staff by the associate director of education and the special education teacher. The staff also participates in training institutes and conferences to further augment their skills in working with handicapped children. Consultants are also an integral part of training. For the past two years, the Pueblo of Acoma and the Pueblo of Laguna have coordinated efforts to get a special education class taught on site at Acoma through efforts from the All Indian Pueblo Council Teacher Education Project and the University of New Mexico Special Education Department. The paraprofessional staff will enroll in the special education class.

TECLER DIAGNOSTIC CENTER BIRTH TO SIX PROGRAM
FOR HANDICAPPED CHILDREN

FISCAL AGENCY: Greater Amsterdam School District

ADDRESS: 11 Liberty Street
Amsterdam, New York 12010

PHONE: 518/843-3180
YEARS OF FUNDING: 3

PROJECT STAFF: John F. Quatrini, Director; Richard Minoque, Supervisor
Occupational Therapist, Physical Therapist, Speech Pathologist, Occupational
Therapy Assistant, Clerk-Typist, 3 Teacher Aides

CHARACTERISTICS OF TARGET POPULATION:

The project serves approximately 40 children (birth to 6) who exhibit varying developmental disabilities. Referrals are obtained from a variety of sources such as physicians, public health nurses, social workers, and school district personnel. The geographic area is predominantly rural.

PROGRAM FOR CHILDREN:

The program, which is housed in an elementary school, runs parallel to the regular 200-day school year, but adds a 4- or 5-week summer program. Children attend the program from three to five days per week. Services include speech and language therapy, special education, occupational therapy, physical therapy, and some medical services which are provided by project-sponsored physicians. An IEP is prepared for each child, and educational and therapeutic activities are determined on an individual basis and provided in accordance with each child's habilitation plan.

MEASURES OF CHILD PROGRESS:

The child's program is subject to an annual needs assessment or staffing evaluation which is conducted by all members of the multidisciplinary staff. To monitor the general progress of children, the staff uses standardized evaluation tools such as the Portage Behavior Checklist and the LAP. In addition, staff members use evaluation tools applicable to their individual areas of expertise.

PROGRAM FOR PARENTS:

Parents are encouraged to become active participants in their child's program. In addition to in-school participation, they are encouraged to incorporate some of the school activities into their home routine to improve the likelihood of their child making progress. Evening meetings are held for parents to receive additional information regarding programming for handicapped children and other services which are available in the area.

STAFF DEVELOPMENT:

Staff members are encouraged to attend conferences and expand their knowledge by maintaining contacts with fellow professionals in the area. Specialists have been brought into the center to provide training to all staff members.

DEVELOPMENTAL INFANT PROGRAM IN HOSPITAL AND HOME (DIPHH)

FISCAL AGENCY: Research Foundation CUNY
on Behalf of Herbert H. Lehman College

ADDRESS: Carmen Hall B-20, Herbert H. PHONE: 212/756-9700
Lehman College YEARS OF FUNDING: 1
Bedford Park Blvd., East
Bronx, New York 10468

PROJECT STAFF: Frieda Spivack & Shirley Zeitlin, Co-Directors

CHARACTERISTICS OF TARGET POPULATION:

The project serves 20 severely handicapped children ages birth to 5 who have chronic medical conditions which require long-term hospitalization, recurrent hospitalization, or continuous involvement with the hospital outpatient clinic, and their parents and/or caregivers.

PROGRAM FOR CHILDREN:

The educational program, based on the Model for Personalized Learning, has two components: (1) a hospital-based program for chronically ill children and (2) a home- and hospital-based program for children released from the hospital but attending one or more medical clinics. Overall goals are to increase the child's ability to cope with self and environment and to increase the child's developmental skills in the areas of: social-emotional, visual motor, gross motor, visual and auditory perception, language, and informational and conceptual processing. Children in the hospital-based component receive three one-hour instructional sessions weekly. Children in the home-based component receive services twice a week, once at home and once at the hospital.

MEASURES OF CHILD PROGRESS:

The Basic Concepts Assessment and Coping Inventory are used to measure child progress.

PROGRAM FOR PARENTS:

The goals of the parent program are to increase the parent's ability to cope with the child by: (1) increasing understanding of the child's special needs, (2) increasing the parent's ability to cope with own and family needs as a result of the impact of having a special child, and (3) acquiring and utilizing skills to help increase the child's competence. Parents of children in the hospital-based component meet with the teacher/intern weekly on how to implement the child's education plan, and also meet with a parent group to help increase the parent's competency to cope. Parents of children in the home-based component receive instruction during the weekly home visit and participate in the weekly parent group meetings. All parents meet individually with the nurse practitioner and project director as needed. Parent meetings provide information, sharing and socializing. Some of the hospitalized children have been abandoned by their parents and one of our goals is to reinvolve them. Meanwhile, support is given to volunteer grandparents who assume the primary caregiver role.

STAFF DEVELOPMENT:

The co-directors of the program are responsible for training the hospital staff and graduate students working as teachers/interns in the attitudes, knowledge, and skills necessary to implement the child program and to integrate medical, educational and psychological objectives.

INFANT AND TODDLER LEARNING PROGRAM

FISCAL AGENCY: The City College of New York, City University of New York,
Research Foundation

ADDRESS: Bronx Developmental Center
1200 Waters Place
Bronx, New York 10461

PHONE: 212/430-0673
YEARS OF FUNDING: 2

PROJECT STAFF: Kathryn LeLaurin, Director; Diane Rabsternek, Coordinator
Head Teacher, 3 Paraprofessionals, Driver, Physical Therapist, Speech
Therapist, Occupational Therapist, Social Worker (part-time)

CHARACTERISTICS OF TARGET POPULATION:

The project integrates 12 handicapped and 12 nonhandicapped children (birth to 3). The handicapped children served have Down's syndrome, spina bifida, cerebral palsy or are at risk for developmental problems (children born prematurely, weighing under 1500 grams).

PROGRAM FOR CHILDREN:

The program is a center-based, developmental and educationally-oriented day care program, open five full days per week, providing complete rehabilitation (OT, PT, speech), educational evaluations, and interdisciplinary goal and activities planning. Goals drawn from the Vulpe are developed further by team members and follow the normal sequence in all domains. The infant component is more individualized, while the toddler group day follows a typical preschool schedule modified to meet the developmental needs of children under age 3.

MEASURES OF CHILD PROGRESS:

Child progress is evaluated using the Griffiths Developmental Scales every six months and the Vulpe Assessment Battery every three months. Observational measures of selected aspects of child performance are made daily.

PROGRAM FOR PARENTS:

Parents participate in 15 to 18 individualized training sessions that focus on child growth and development, in quarterly LEP updates with program and rehabilitation staff, in counseling groups with an agency social worker, on the Advisory Board fund-raising, demonstration/dissemination and advocacy subcommittees, and in a parents organization which sponsors social events and individual support for new families.

STAFF DEVELOPMENT:

Staff training is conducted by the project director, rehabilitation staff, and professionals from related agencies. Sessions are conducted at least twice monthly and include such topics as normal and atypical development, affective development, handicapping conditions, classroom management, working with parents, and current social and legal issues relating to handicapped children and their families.

SPECIAL FEATURES OF PROGRAM:

This program is unique in that it integrates handicapped and nonhandicapped children under the age of three in a full day program. Research is underway on organizational aspects of infant center management and on staff development skills.

TRAINING PROGRAM FOR ATYPICAL INFANTS AND CHILDREN

FISCAL AGENCY: Cantalician Center for Learning
(Non-Public School for Handicapped Children)

ADDRESS: 3233 Main Street
Buffalo, New York 14214

PHONE: 716/833-5353
YEARS OF FUNDING: 3

PROJECT STAFF: Sister Raphael Marie, Director
Assistant Director, Parent Coordinator, 2 Infant Teachers, Community Coordinator, Occupational Therapist, Project Evaluators (internal and external), Inservice Trainer, Pediatric Specialist, Language Development Specialist, Audiologist, Secretary, Infant Trainers, Interventionists, Employed Parents

CHARACTERISTICS OF TARGET POPULATION:

The program is composed of three elements serving at-risk and severely handicapped infants (birth to 3) and their families. The Center Program serves severely handicapped infants, Satellite Centers focus on at-risk infants, and the Developmentally Disabled Parents Program (DDPP) works with families headed by parents who have a history of developmental disability.

PROGRAM FOR CHILDREN:

Families are viewed as the primary caregivers and teachers of their infants. The families of infants enrolled in the Center Program bring their children to the center to work on tasks appropriate to the level and type of handicap. Satellite Centers use a consulting, demonstration model via appointments and home visits. The DDPP is a highly structured, home-based program. All program activities are drawn from a number of published curricula.

MEASURES OF CHILD PROGRESS:

The Bayley is used in pre and post comparisons of child progress. Change in specific behaviors is monitored by the systematic collection of behavioral data.

PROGRAM FOR PARENTS:

Following a needs assessment, a Specialized Family Plan is developed. Included are goals, commitments, learning activities and a timeline. Reducing stress, enhancing coping skills, and strengthening family ties are major goals.

STAFF DEVELOPMENT:

Close supervision and team involvement are the primary sources of staff development. Formal inservice meetings are often the result of the program's ongoing needs assessment. The nonprofessional interventionists in the DDPP receive intensive training.

SPECIAL FEATURES OF PROGRAM:

The program operates during nontraditional hours to increase paternal participation. An attempt is made to impact on pediatricians.

EARLY INTERVENTION - A RURAL BASED DEMONSTRATION PROJECT

FISCAL AGENCY: St. Lawrence-Lewis Board of Cooperative Educational Services (BOCES)

ADDRESS: Special Education
Box 231, Outer State Street
Canton, New York 13617

PHONE: 315/386-#506
YEARS OF FUNDING: 1

PROJECT STAFF: Edward A. Shafer, Director; Maureen Sullivan, Coordinator
Clerk-Typist (part-time), 2 Teachers, 2 Speech Therapist, Social Worker
(part-time)

CHARACTERISTICS OF TARGET POPULATION:

The project serves 30 children (birth to 5) who are handicapped as defined by P.L. 94-142 regulations. Priority is given to severely handicapped children.

PROGRAM FOR CHILDREN:

A parent-child learning center and home program provides direct services to the children. Individualized educational programming focuses upon social, motor, cognitive, self-help, and linguistic skills. Goal selection is made by both parents and teachers using a variety of curriculum resources such as the LAP and the Portage Guide to Early Education.

MEASURES OF CHILD PROGRESS:

A rate of development or learning expectancy level is used to determine child progress. The following measures may be used, depending on the child's age and area of difficulty: Bayley, Stanford-Binet, McCarthy, ITPA, Goldman-Fristoe Test of Articulation, and Preschool Language Scale. The Alpern-Boll is administered to all children as pre- and posttests.

PROGRAM FOR PARENTS:

Parents are considered full and active partners in the education of their children and are asked to participate in 50 percent of the instructional activities undertaken with children. An individual family plan is devised to reflect family perceptions of need and action plans. The general goals for family participation are to: (1) increase parental knowledge of their child's developmental needs; (2) promote perception of status to be achieved through parenting; (3) provide specific information on successful adult-child interaction; and (4) facilitate parental access to other community resources necessary to promote their own mental health and sense of well being.

STAFF DEVELOPMENT:

The project coordinator has the major responsibility for planning and implementing inservice training. Forty-two hours of inservice training were provided by the end of the second quarter of the first year of funding. The staff indicates areas they perceive as needs, and service sessions are scheduled accordingly.

ELMIRA MOBILE RESOURCE TEAM

FISCAL AGENCY: Elmira (New York) City School District

ADDRESS: 301 Hoffman Street
Elmira, New York 14905

PHONE: 607/733-0883
YEARS OF FUNDING: 2

PROJECT STAFF: George J. Welch, Director; Livia M. Trexler, Coordinator
Speech/Language Therapist, Occupational Therapist, Team Assistant,
Parent-Consultant Teacher, Special Education Resource Teacher/Team Leader

CHARACTERISTICS OF TARGET POPULATION:

The program serves 80 children (3 to 6) who are handicapped and have a 1½-to 2-year delay in two or more developmental areas. All children reside in the Elmira City School District.

PROGRAM FOR CHILDREN:

The project provides a multidisciplinary Mobile Resource Team to work with existing public school programs and major community agencies involved with handicapped children who are 3 to 6 years old. The purpose of the team is to provide direct support services (such as speech and language therapy, occupational therapy, home/school services, and/or special education consultation) at the child's present classroom placement.

MEASURES OF CHILD PROGRESS:

The DDST, a psychological evaluation, and the LAP are used as baseline data for each child in the program. A wide variety of assessment tools is used for further evaluation as needed, including the Mobile Resource Team Developmental Inventory. The evaluation of each child's performance is an ongoing observation and documentation process. In addition to the IEP, progress reports based on an updating of the LAP are written twice a year.

PROGRAM FOR PARENTS:

The purpose of the parent program is to inform and guide parents of handicapped children in appropriate management and intervention techniques. Parent involvement activities include parent group meetings, newsletters, home visits, advisory committee participation, workshops, and progress review conferences.

STAFF DEVELOPMENT:

Each team member contracts at the beginning of a program year to reach individual learning goals. A continuous inservice program (a minimum of ten hours per month) provides formal and informal training. Weekly staff meetings are used for case and project review, and for reports from staff who have attended conferences, workshops, and classes.

HOSPITAL EDUCATIONAL LIAISON PROGRAM (HELP)

FISCAL AGENCY: The Sealed Institute

ADDRESS: 144-61 Roosevelt Avenue
Flushing, New York 11354

PHONE: 212/939-8700
YEARS OF FUNDING: 2

PROJECT STAFF: Reuben M. Schonebaum, Coordinator
Social Worker, Nurse, Psychologist, Mental Health Worker

CHARACTERISTICS OF TARGET POPULATION:

HELP serves 40 infants (birth to 3) who are identified as at risk at birth and placed in the Neonatal Intensive Care Unit at Booth Memorial Hospital Center. In addition, the project serves ten infants of high-risk mothers (single or teen-aged mothers, drug or alcohol abusers, or emotionally or socially maladjusted) and ten infants identified by screening in the Pediatric Clinic for developmental delays.

PROGRAM FOR CHILDREN:

The development of the at-risk infant is monitored by regular assessments with a developmental checklist, and individual educational plans are written for each child. Play activities, demonstrated to the parents in the home, are selected from a curriculum keyed to the developmental assessment.

MEASURES OF CHILD PROGRESS:

The Bayley is used as a pretest for infants entering the program and is administered at 4, 9, 18 and 30 months of age. The developmental checklist serves as a cumulative indicator of the child's progress toward goals targeted in the individual plan.

PROGRAM FOR PARENTS:

Parent involvement activities include parents' systematic observations of their infants using the developmental checklist, home visits by staff which facilitate infant stimulation and utilization of community resources, and parent education groups. Family nights afford an opportunity for parents to share information and participate in topical discussions.

STAFF DEVELOPMENT:

Monthly interdisciplinary meetings between project and hospital staff are used for case and project review. Project staff make on-site visits to other infant programs and attend conferences and workshops on infant assessment and early intervention.

SPECIAL FEATURES OF PROGRAM:

Parents are provided with a "Baby Book" in which they can note emergency phone numbers, pediatrician's instructions, infant play activities, and child progress. Instant photographs of the babies are added to the books to record the various stages of development.

PARENT INVOLVEMENT PROGRAM FOR INFANTS

FISCAL AGENCY: United Cerebral Palsy Association

ADDRESS: 231 Roberts Building
Jamestown, New York 14701

PHONE: 716/483-0213
YEARS OF FUNDING: 1

PROJECT STAFF: Marilyn Johnson, Director; Sylvia Calla, Coordinator
Special Education Teacher

CHARACTERISTICS OF TARGET POPULATION:

The project serves 24 children between ages birth and 3 years who are at risk for developmental delay or who have physical handicaps, brain damage, syndromes suggesting mental retardation, perceptual and cognitive handicaps, or other developmental problems.

PROGRAM FOR CHILDREN:

The children are served in a home- or center-based program, or a combination of the two. Under the supervision of the special education teacher, the parent has the primary responsibility for the child's educational program. A phased parent training procedure allows parents to become independent by gradually reducing help and monitoring. The Portage Guide to Early Education provides the basis for the curriculum.

MEASURES OF CHILD PROGRESS:

The Bayley is given pre and post to document developmental gains.

PROGRAM FOR PARENTS:

In addition to being directly involved in the child's educational program, parents may participate in weekly parent group meetings, parent training services provided by Chautauqua County BOCES, and weekly home visits by the special education teacher. The project's parent services encourage three major parental roles in relation to their handicapped child: (1) advocate--a knowledgeable spokesperson for the child, (2) planner--a predictor rather than reactor, and (3) teacher--an effective instructor for the child.

STAFF DEVELOPMENT:

Staff receives inservice training in all program components, especially identification and assessment of handicaps, interview, and visitation skills, and techniques for counseling abusive parents. A periodic staff needs assessment is conducted to identify areas of interest. Activities may include speakers, practicum workshops or visits to other agencies.

A MONTESSORI APPROACH: TEACHING CHILDREN WITH HANDICAPS
IN A MAINSTREAMING ENVIRONMENT (MATCH ME!)

FISCAL AGENCY: East River Montessori School

ADDRESS: East River Montessori School
577 Grand Street
New York, New York 10002

PHONE: 212/254-7300
YEARS OF FUNDING: 3

PROJECT STAFF: Herbert M. Citrin, Director; Yuki Okuma, Coordinator
3 Teachers, Intern, Assistant, 1.5 Speech Pathologists, Special Education
Consultant (part-time)

CHARACTERISTICS OF TARGET POPULATION:

The school presently serves nine speech and language impaired children (2½ to 6) from Manhattan.

PROGRAM FOR CHILDREN:

The program goal is to mainstream handicapped children in a Montessori environment, while providing language therapy in the classroom.

MEASURES OF CHILD PROGRESS:

The following instruments are used for screening purposes: DDST, PPVT, and Goldman-Fristoe Test of Articulation. The child's vision and hearing are also screened. Instruments used in diagnosing handicaps are the Carrow Elicited Language Inventory and ITPA. An oral peripheral examination and informal language sample are included as diagnostic information. Child progress is measured by teacher observation and posttesting with the Carrow Elicited Language Inventory, informal language sample, ITPA, and PPVT.

PROGRAM FOR PARENTS:

Meetings and workshops increase parental awareness of language development, appropriate language activities for children, and state and federal laws. Parents participate in IEP meetings and maintain phone contact with the school concerning their child's progress.

STAFF DEVELOPMENT:

Staff inservice training takes place two days before school begins in September. Subjects covered include grant overview and activities, staff involvement in grant activities, and normal speech/language and child development. During the school year, teachers participate in an inservice workshop once a week for two hours. Through inservice training, teachers are taught to provide language therapy within the regular classroom.

PRESCHOOL READINESS PROGRAM FOR HANDICAPPED CHILDREN

FISCAL AGENCY: New York City Board of Education
Division of Special Education

ADDRESS: Preschool Readiness, PS 198M
1700 Third Avenue
New York, New York 10028

PHONE: 212/876-0260
YEARS OF FUNDING: 3

PROJECT STAFF: Laura Shapiro, Director
2 Teachers, 2 Educational Assistants, Family Worker, Guidance/Liaison
Person, 4 Affiliated Volunteer Medical Teams

CHARACTERISTICS OF TARGET POPULATION:

The project serves 35 to 40 children (2½ to 5) who manifest a significant lag in the areas of speech and language, cognition, fine and gross motor development; social-emotional adjustment; and/or perceptual-motor, auditory-perceptual or visual-perceptual difficulties.

PROGRAM FOR CHILDREN:

Two public school classrooms provide a diagnostic-prescriptive educational program appropriate to the needs of each child. Information from a criterion-referenced developmental checklist, coupled with diagnostic data and therapeutic recommendations provided by hospital teams, is used by the educational staff to determine curriculum activities. The project-developed curriculum is supplemented by the Developmental Therapy curriculum package and is based on state and local manuals scaled down to the preschool level.

MEASURES OF CHILD PROGRESS:

The DDST and Vineland are used in initial screening and intake. Admitted children are evaluated at 6-month intervals with the LAP-D. Social-emotional development is tracked using the Levenstein Child Behaviors Checklist and teacher anecdotal observations. Progress at home is gauged by periodic, teacher-conducted parent interviews.

PROGRAM FOR PARENTS:

Parents are encouraged to observe their children daily in the classroom and to participate in selected activities. They are involved in determining immediate therapeutic goals and are continuously advised of their child's progress. Educational workshops and a parent library are provided. Weekly meetings are held to ascertain parent needs and provide a supportive peer network. Parents participate on the Advisory Board and are invited to lend their talents, skills and avocations to the project and to each other.

STAFF DEVELOPMENT:

Ongoing training is conducted via monthly meetings, workshops, and attendance at regional and national educational conferences. Liaison for curriculum development and student teacher training is maintained with local universities.

SPECIAL FEATURES OF PROGRAM:

The Preschool Readiness Program marries the city's massive health care system with the educational community, thereby maximizing the impact of both.

A REGIONAL DEMONSTRATION PROGRAM FOR
PRESCHOOL HANDICAPPED CHILDREN

FISCAL AGENCY: Putnam/Northern Westchester Board of Cooperative Educational Services (BOCES), Special Education Department

ADDRESS: Putnam/Northern Westchester BOCES PHONE: 914/245-2700
Special Education Department YEARS OF FUNDING: 2
Yorktown Heights, New York 10598

PROJECT STAFF: Paul Irvine, Director; Amy L. Toole, Coordinator
4 Classroom Teachers, 5 Classroom Aides, Home Teacher, 3 Home Trainer Aides, Teacher Trainer Specialist, Speech/Language Pathologists (part-time), Psychologists, Social Workers, Physical Therapist, Secretary

CHARACTERISTICS OF TARGET POPULATION:

The program serves 125 children (birth to 5) who demonstrate a broad range of handicapping conditions.

PROGRAM FOR CHILDREN:

Child services are a combination of home-based (birth to 5) and center-based (3 to 5) approaches. Home training is based on the Portage Project Model, and weekly visits are made to assist parents in working with their children. If a child attends a regular nursery school, day care, or Head Start program, visits are also made to those agencies. The half-day classroom program employs a diagnostic-prescriptive curriculum that is based on a transdisciplinary assessment and teacher consultation model. The programs are highly structured with activities selected to meet the IEPs prepared for each child.

MEASURES OF CHILD PROGRESS:

Child progress data are obtained by administration of the Bayley and McCarthy at the beginning and end of each school year. Other data are obtained by analysis of the Alpern-Boll, IEPs, Portage Behavior Checklist, and a variety of questionnaires.

PROGRAM FOR PARENTS:

Parent activities include counseling, monthly parent training sessions (topics are based on a parent needs assessment), individual parent conferences, participation in IEP development, classroom observations, and completion of home-training prescriptions. Parents volunteer in the classroom program (utilizing the Parent Volunteer System developed by the project) to maximize individualization in the classroom and to provide training.

STAFF DEVELOPMENT:

Staff development activities are based on the results of a needs assessment administered in the beginning of the year. Inservice workshops are held and staff members are encouraged to attend other conferences.

SPECIAL FEATURES OF PROGRAM:

Demonstration and dissemination are available for training in various components, including home teaching, the transdisciplinary model, Parent Volunteer System, and interagency consultation.

"I (CAN) WILL DO IT" PROJECT

FISCAL AGENCY: Appalachian State University, College of Learning & Human Development

ADDRESS: Department of Special Education
Edwin Duncan Hall
Boone, North Carolina 28608

PHONE: 704/262-2183
YEARS OF FUNDING: 3

PROJECT STAFF: J. Michael Ortiz, Director; Ralph D. Conn, Coordinator
3 Home-Bound Early Education Teachers, Graduate Assistant, Secretary

CHARACTERISTICS OF TARGET POPULATION:

The project presently serves 24 handicapped or multihandicapped preschool children and their siblings in a 4-county mountainous/rural area of northwestern North Carolina.

PROGRAM FOR CHILDREN:

The curriculum consists of materials developed by the Portage Project, supplemented by a project-developed sibling component. Precision teaching principles are applied by three home-bound teachers.

MEASURES OF CHILD PROGRESS:

Yearly pre- and posttest administration of the Alpern-Boll provides a measure of child progress. Standardized assessment instruments administered by the multidisciplinary staff of the local (Appalachian) Developmental Evaluation Center are also used to assess children.

PROGRAM FOR PARENTS:

The program for parents emphasizes the importance of the acquaint/teach/support/expand/maintain pattern derived from the PEECH model. Major parent activities include participating in intensive workshops and training, gathering data (with project staff acting as an information source and referral service), learning about normal growth and development in children, training in observational skills, borrowing learning aids, and making instructional materials.

STAFF DEVELOPMENT:

During the first two months of the school year, staff members are oriented to all facets of the project. Training is conducted by the Appalachian State University Special Education faculty, TADS, the Portage Project, and Western Carolina Center. Specialized topical workshops are also held at other times during the year.

SPECIAL FEATURES OF PROGRAM:

Special features of the program include the sibling training component. Instructional workshops are also provided to area day care personnel and regular kindergarten teachers to aid in mainstreaming handicapped clients. The staff plans to implement presentations of "The Kids on the Block" (a troupe of handicapped and nonhandicapped puppets) to children in settings where project children are to be mainstreamed with the objective of increasing knowledge and awareness concerning handicapping conditions.

KENDALL INFANT/TODDLER DEMONSTRATION PROJECT (KID)

FISCAL AGENCY: Henry Wiseman Kendall Center

ADDRESS: 4015 West Wendover Avenue PHONE: 919/294-4860
Greensboro, North Carolina 27407 YEARS OF FUNDING: 2

PROJECT STAFF: P. J. Coffin, Director
Educational Specialist, Mainstreaming Coordinator, Assistant Teacher, Home
Programmer, Parent Trainer, Program Evaluator, Physical Therapy Consultant,
Secretary

CHARACTERISTICS OF TARGET POPULATION:

Twenty-two children (birth to 3) are served by the project. Handicapping conditions include high risk for abnormal development, mildly or moderately retarded (with a priority for Down's syndrome), physical handicaps, and visual impairments.

PROGRAM FOR CHILDREN:

The program has three components: (1) center- and home-based programming (birth to 1½), (2) structured classroom experience (1½ to 3), and (3) mainstreaming into community nurseries and preschool settings. The project also provides training for teachers who receive mainstreamed project children.

MEASURES OF CHILD PROGRESS:

Project children are assessed biannually utilizing the Bayley, Vineland, physical therapy evaluations, Sequenced Inventory of Child Development, Carrow Elicited Language Inventory, REEL, and LAP. Within the toddler classroom, data on each child's IEP goals are collected daily, and programs are updated accordingly. Systematic observations of social interaction are collected in the mainstreaming centers.

PROGRAM FOR PARENTS:

Parents participate in a weekly training program which includes observation of their children (accompanied by programmed feedback), and individual and group training in specific skill areas such as behavior analysis, child development, "mainstreaming and the law," and organization of group support systems. Periodic home visits augment the weekly sessions.

STAFF DEVELOPMENT:

Staff members complete personal needs assessment inventories and are encouraged to identify other training needs. Training is consistent with identified needs and relevant to the individual staff member's function within the project.

SPECIAL FEATURES OF PROGRAM:

The Kendall Center provides nurse and pediatric consultation, social work services, speech pathology, child development, and behavior analysis consultation to the project. Several colleges and universities in the area provide volunteers to collect data in return for training opportunities.

EARLY INTERVENTION PROGRAM FOR CHILDREN WITH SPECIAL NEEDS

FISCAL AGENCY: Bismarck Early Childhood Education Program (BECEP)

ADDRESS: 900 East Bowen Avenue
Bismarck, North Dakota 58501

PHONE: 701/255-3866
YEARS OF FUNDING: 3

PROJECT STAFF: Dale Walker, Director; Michelle Dzura-Hougen, Coordinator
4 Teachers, 1 Teaching Assistant, 3 Aides

CHARACTERISTICS OF TARGET POPULATION:

Children with marked developmental barriers, as assessed on the BECEP Assessment Tool, are served. Twenty-four children, ages birth to 3 years, are served in Bismarck, 12 children are served in satellite classrooms in rural North Dakota, and six children are served on the Standing Rock Indian Reservation.

PROGRAM FOR CHILDREN:

A combination center- and home-based program is used. Each child is scheduled for two 1½-hour class sessions per week. Teachers make home visits once every two weeks. Each child has an individual program which is updated at least twice per year. Ancillary services are provided by a school psychologist, physical therapist, occupational therapist, speech therapist, and vision and hearing specialists.

MEASURES OF CHILD PROGRESS:

The BECEP Assessment Tool is administered at the beginning and end of the program year. The Bayley is also given upon program entry. Continual child progress is monitored on the BECEP Curriculum Guides. The child is videotaped within a group at the beginning and end of the year for comparison ratings. At the end of the year, the percentage of each child's long- and short-term IEP objectives met are determined.

PROGRAM FOR PARENTS:

A parent or guardian attends each session with the child. Parents are responsible for completing in-class and home tasks assigned by the teacher. Parents are rated biannually on the ABC (Assessment Behaviors of Caregivers) Scale and parent/child videotapes. IEPs are written for each parent, based on needs identified on the Parent Needs Assessment, Q-Sort, and by the parent.

STAFF DEVELOPMENT:

Weekly staff meetings are held for BECEP staff. IEPs are written for each teacher, based on ratings from the Teacher Competency Scale and needs identified by each teacher. The teachers are rated biannually on the ABC Scale and teacher/child videotapes. Training packets are available for each new staff member, and ongoing training is obtained through monthly BECEP inservice.

SPECIAL FEATURES OF PROGRAM:

BECEP consists of five early childhood programs under a common administration: Head Start, Day Care, Special Needs Program, Child Family Resource Program, and the Early Intervention Program.

PROJECT FOR MOTOR IMPAIRED INFANTS AND THEIR FAMILIES

FISCAL AGENCY: Children's Hospital Medical Center of Akron

ADDRESS: 281 Locust Street
Akron, Ohio 44308

PHONE: 216/379-8256
YEARS OF FUNDING: 1

PROJECT STAFF: Philippa Campbell & G. Dean Timmons, Co-Directors
Physical Therapist, Occupational Therapist, Social Worker

CHARACTERISTICS OF TARGET POPULATION:

The project serves 25 infants below the age of 3 years who are either diagnosed or at risk for motor development as a function of neurological causes. These children reside in the predominantly rural 17-county geographic region served by Children's Hospital Medical Center of Akron.

PROGRAM FOR CHILDREN:

Project infants receive neurodevelopmental therapy to facilitate sensorimotor skill acquisition. Home-based services are provided for the youngest infants and for those infants and families who reside so far from Children's Hospital that regular travel to the center is not feasible. By the age of 3, children will move from home- or center-based motor intervention programming into integrated community-based preschool programs. Children will be followed for one year after placement.

MEASURES OF CHILD PROGRESS:

The Index of Qualification for Specialized Services and Pattern Analysis Form will be used to identify and assess the infants. Standard assessment procedures administered prior to entrance and again at yearly intervals include the Bayley, Uzgiris-Hunt, and Pre-Speech Assessment Scale, in combination with ongoing performance assessments and other measures as appropriate.

PROGRAM FOR PARENTS:

Therapist and parents determine areas of parent concern in regard to the infant's motor progress. Parents are trained to work with their infant at home and use videotape to analyze their teaching. Opportunities for both individual and group sessions with the staff social worker are available.

STAFF DEVELOPMENT:

All staff members participate in orientation and training sessions on behavioral theory and technology, data collection systems, strong inference model, and data-based decision making. Ongoing training experiences will be provided through videotape analysis of therapist/infant interaction, weekly training sessions, attendance at professional meetings, workshops and seminars, participation in a weekly "journal" club; and subsidized course work.

INFANT STIMULATION/MOTHER TRAINING PROJECT

FISCAL AGENCY: University of Cincinnati, College of Medicine

ADDRESS: Department of Pediatrics
231 Bethesda Avenue
Cincinnati, Ohio 45257

PHONE: 513/872-5341
YEARS OF FUNDING: 3

PROJECT STAFF: Earladeen Badger, Director
Neonatologist, Physician's Assistant, Educational Coordinator, Social Worker,
Pediatric Nurse, Paraprofessional

CHARACTERISTICS OF TARGET POPULATION:

This project serves 40 premature infants who weighed less than 1250 grams at birth and whose mothers are at high social risk due to their young age and welfare status.

PROGRAM FOR CHILDREN:

Infant stimulation procedures are carried out by nursing staff while infants are in an intensive care nursery. During the infant's first year of life, IEPs are developed utilizing the EMI Assessment Scale. A two-faceted educational intervention program during the first year includes mother/infant group classes and individualized home instruction. Follow-up of project infants occurs as indicated through the United Services for Effective Parenting (USEP) Central Referral System.

MEASURES OF CHILD PROGRESS:

Instruments are administered in the nursery, the clinic, and the home. In the nursery, the Brazelton is used at 38 to 40 weeks gestational age. In the clinic, medical follow-up is conducted monthly utilizing the Amiel-Tison Neurological Assessment. At home, monthly assessment is made utilizing the Uzgiris-Hunt and, at 12 months gestational age, the Bayley.

PROGRAM FOR PARENTS:

Weekly parent support group meetings are held while the infant is in the intensive care nursery. Monthly postnatal mother/infant classes and/or weekly home visits also occur.

STAFF DEVELOPMENT:

Weekly one-hour team meetings are held for case and program review. Monthly team meetings are held for program development and evaluation. Project staff members regularly participate in workshops, conferences, and academic meetings for the purpose of professional development and program dissemination. Two 4-day courses are offered annually by project staff.

SPECIAL FEATURES OF PROGRAM:

Special features of the program include the identification and educational intervention of at-risk infants (i.e., premature or low birthweight) beginning at birth, association with a pediatric newborn division at a large medical center (Cincinnati General Hospital and Children's Hospital), and a continuum of educational intervention programs which provides follow-up through USEP.

THE DEVELOPMENT OF A CURRICULUM FOR PEDIATRIC
RESIDENTS IN HANDICAPPING CONDITIONS

FISCAL AGENCY: The Nisonger Center

ADDRESS: 1580 Cannon Drive
Columbus, Ohio 43210

PHONE: 614/422-9780
YEARS OF FUNDING: 1

PROJECT STAFF: Michael J. Guralnick, Director; Karen E. Heiser, Coordinator; Graduate Assistant

CHARACTERISTICS OF TARGET POPULATION:

Pediatric residents at eight test sites across the country will participate in the one-month rotation to be developed by a steering committee and a national task force.

PROGRAM FOR CHILDREN:

The proposed curriculum is divided into twelve goal areas: child development; attitudes toward exceptional children; handicapping conditions; prevention; screening, diagnosis, and assessment; interdisciplinary team; management; parents; community resources; health and medical care; developmental, educational, and psychological research; and legal and legislative aspects. Preliminary implementation of parts of the curriculum will begin in the first year, and full implementation will occur during the second year.

MEASURES OF CHILD PROGRESS:

A computer-assisted instructional model of patient management is being developed for both instruction and evaluation purposes. Each goal area has several objectives with associated evaluation mechanisms such as objective tests, clinical observations, and apprenticeship programs.

PROGRAM FOR PARENTS:

A major goal of the project is to inform pediatric residents about parental concerns.

STAFF DEVELOPMENT:

An intensive 10-hour training session is held for new program staff and program managers (professionals and student trainees) at the beginning of each year. Weekly meetings and planned workshops also aid in staff development.

SPECIAL FEATURES OF PROGRAM:

A mailing list of all pediatricians in the country has been developed. These physicians are being apprised of current project activities through periodic mailings. They can participate in the curriculum development process through critique of goal areas which are of particular interest to them.

PARENT INFANT PROGRAM (PIP)

FISCAL AGENCY: Ohio State University, Nisonger Center

ADDRESS: 1580 Cannon Drive
Columbus, Ohio 43210

PHONE: 614/422-5176
YEARS OF FUNDING: 3

PROJECT STAFF: Marian Chase, Director; Linda Wnek, Coordinator
Family Services Coordinator, 2 Training and Developmental Specialists, Media Specialist, and Secretary

CHARACTERISTICS OF TARGET POPULATION:

PIP serves 15-25 children (birth to 3) who have developmental disabilities or delays, and their parents. Primary handicapping conditions include severe orthopedic impairments, mental retardation, and other health impairments. Most infants are multihandicapped.

PROGRAM FOR CHILDREN:

The infants and their parent(s) participate in weekly classes to develop and assess the individualized program implemented in the home by family members. A variety of resource materials is used to develop the family program.

MEASURES OF CHILD PROGRESS:

The EMI Assessment Scale (administered at the beginning and end of each project year) is used to develop child programs and determine child progress. Individual objectives are developed and monitored continuously throughout the year.

PROGRAM FOR PARENTS:

Weekly one-hour group sessions provide opportunities for interaction among parents and allow for group-determined needs to be met with assistance and information.

STAFF DEVELOPMENT:

An intensive 10-hour training session is held for program managers at the beginning of each year. Weekly meetings and planned workshops also aid in staff development.

EARLY INTERVENTION FOR HANDICAPPED CHILDREN IN A RURAL AREA

FISCAL AGENCY: Vinton County Board of Education

ADDRESS: Memorial Building
McArthur, Ohio 45651

PHONE: 614/596-5218
YEARS OF FUNDING: 3

PROJECT STAFF: Rebecca J. Zuleski, Director
2 Teachers, 2 Teacher Aides, School Psychologist, School Nurse, Speech Pathologist, Physical Therapist, Occupational Therapist, Administrator

CHARACTERISTICS OF TARGET POPULATION:

Twenty noncategorically handicapped children (3 to 8) are served in this Appalachian area school. The county can be characterized as follows: low educational level, low income level, large geographic area, and low student density.

PROGRAM FOR CHILDREN:

Two early education centers, each with a teacher and aide, operate four days a week for individualized instruction to children. When needed, children receive regularly scheduled visits from the speech pathologist, occupational therapist, and physical therapist.

MEASURES OF CHILD PROGRESS:

The classroom screening assessments of the Live Oak Curriculum are utilized as a preplacement assessment. The individual assessment of the Live Oak Curriculum is administered to all children enrolled in the program as a pre- and posttest.

PROGRAM FOR PARENTS:

Teachers and aides spend one day per week visiting parents in their homes. Teachers acquaint parents with the child's IEP and help them formulate techniques, skills, and attitudes that will assist the child at home. In addition, at regularly scheduled parent inservice meetings, various relevant topics are discussed.

STAFF DEVELOPMENT:

Project concerns are discussed at regular staff meetings. The project staff attends a variety of internal and external inservice programs, conferences, workshops, and classes.

UNIVERSITY PROJECT: STRUCTURING TOWARD REALISTIC EDUCATIONAL
ALTERNATIVES IN MAHONING COUNTY (UPSTREAM)

FISCAL AGENCY: Youngstown State University, Department of Special
Education

ADDRESS: 410 Wick Avenue
Youngstown, Ohio 44555

PHONE: 216/742-3265
YEARS OF FUNDING: 3

PROJECT STAFF: Jack D. Dunsing, Director; Cindy Detwiler, Coordinator
2 Consulting Teachers, Paraprofessional, Graduate Assistant

CHARACTERISTICS OF TARGET POPULATION:

The project serves 30 mildly to moderately involved children (3 to 5) who reside in the attendance area represented by the 11 local and three city school districts of Mahoning County. Eight children receive direct diagnostic/instructional service at any one time; six additional children are served in limited or follow-up services.

PROGRAM FOR CHILDREN:

Once a child has been screened and accepted into the UPSTREAM program, he or she begins a six to eight week assignment with Demonstration Extended Educational Diagnostic Services (DEEDS). During this time, staff develop an individual curriculum for each child which is later implemented in the child's home school. UPSTREAM teachers provide a systematic follow-up liaison service between DEEDS and the child's classroom teacher. The DEEDS' curriculum design combines a cognitive-developmental orientation with a process approach based upon S.A. Kirk's psycholinguistic processing model. The Building and Applying Strategies for Intellectual Competencies in Students (BASICS) method supplements the curriculum activities to stimulate language development and social interaction.

MEASURES OF CHILD PROGRESS:

The DDST is used at the initial assessment. The Alpern-Boll is used as both a pre- and posttest. The LAP-D is given four weeks into the program and again at the end of the academic year.

PROGRAM FOR PARENTS:

The project contacts parents weekly and provides home activity packets to encourage parent interaction with the child and to reinforce classroom objectives. Home visits occur as appropriate.

STAFF DEVELOPMENT:

A staff development system allows each staff member to conduct a self-assessment of training needs. In order to accomplish individual objectives, staff members may attend local, regional, and national workshops, seminars and conferences, and/or university courses.

COMMUNITY INTERACTION EARLY EDUCATION PROJECT (CIEEP)

FISCAL AGENCY: Tulsa University

ADDRESS: 600 S. College
Lorton Hall, Room 204
Tulsa, Oklahoma 74104

PHONE: 918/592-6000
YEARS OF FUNDING: 1

PROJECT STAFF: Kaye Theimer, Director; Jan Woods, Coordinator
Project Secretary, Educational Specialist, Audiologist, Parent/Family Consultant, Child Development Specialist, Developmental Pediatrician, Psychologist, Social Worker

CHARACTERISTICS OF TARGET POPULATION:

The project serves 30 children ages birth to 8 years who are learning disabled, mentally retarded, severely handicapped, or emotionally disturbed.

PROGRAM FOR CHILDREN:

CIEEP offers a home, community, and school-based individualized instructional program for preschool and primary-aged handicapped children and their parents. The children are seen on a weekly basis at the CIEEP center. Follow-up visits to home and school are also scheduled weekly for each participant. Additional services are provided by an interdisciplinary team composed of a staff developmental pediatrician, psychologist, child development specialist, social worker, audiologist, and speech pathologist.

MEASURES OF CHILD PROGRESS:

The assessment process includes four phases: (1) screening of potential CIEEP participants using a formal identification battery (FIB); (2) diagnostic screening of selected participants in the areas of language, behavior, cognitive and motor functioning; (3) continuous assessment of educational programming based on developmental objectives, criterion-referenced materials and daily behavioral objectives; and (4) final assessment, including the FIB.

PROGRAM FOR PARENTS:

CIEEP provides direct involvement in developmental and educational aspects of handicapped children. Workshops for parents, educators, and other professionals are held each month. The Advisory Council includes three parents of handicapped children and provides input to the project's activities. Resource materials are available at the project site.

STAFF DEVELOPMENT:

Orientation and inservice for staff personnel includes workshops and staffings covering the following topics: (1) introduction to major objectives, (2) target populations, (3) assessment and evaluation, (4) overview of curriculum, (5) parent-family components, (6) consultant roles, (7) advisory council, (8) tour of facility and equipment, (9) educational and assessment materials, (10) home and school follow-up procedures.

CENTER ON HUMAN DEVELOPMENT PRESCHOOL PROGRAM

FISCAL AGENCY: University of Oregon

ADDRESS: Center on Human Development
901 E. 18th Street
Eugene, Oregon 97403

PHONE: 503/686-3575
YEARS OF FUNDING: 3

PROJECT STAFF: Diane Bricker, Director; Mary Anne Chope, Coordinator
6 Teachers, Physical Therapist, Speech Pathologist (.50)

CHARACTERISTICS OF TARGET POPULATION:

The project serves 75 children from 10 months to 5 years old: 61 have handicapping conditions that range from mildly to severely disabling, 14 children are functioning within normal limits. Eighteen additional children and families are served in a home-based outreach program.

PROGRAM FOR CHILDREN:

Upon entering the home and school programs, all children are assessed in each of the curricular areas: conceptual learning, social behaviors, language, motor development, self-help, and academic skills. Following the initial assessment, individualized prescriptive programs are written. The individualized programs are implemented in home settings via the parent-infant program and in seven classroom units where handicapped children work and play with their nonhandicapped peers.

MEASURES OF CHILD PROGRESS:

Four types of instruments are used to measure child progress: (1) standardized instruments such as the Bayley are administered at the beginning and end of the school year; (2) UPAS is administered quarterly; (3) Student Progress Record, a statewide assessment instrument, is used to monitor child progress throughout the school year; and (4) curriculum-linked assessments are used to establish specific training objectives and progress toward acquisition.

PROGRAM FOR PARENTS:

Parents meet regularly with the staff to discuss their child's progress. Parent training is done through observation, classroom participation, a parent training manual, and meetings. Parents are active advocates for the children within the community, the state and the region.

STAFF DEVELOPMENT:

Weekly staff meetings are held to discuss problems that arise in the classroom. On a regular basis, consultants provide outside evaluation and keep the staff abreast of new information and intervention strategies.

INFANT DIAGNOSTIC AND TREATMENT PROGRAM

FISCAL AGENCY: Good Samaritan Hospital and Medical Center

ADDRESS: 2222 N.W. Lovejoy, Suite 361
Portland, Oregon 97210

PHONE: 503/229-7220
YEARS OF FUNDING: 1

PROJECT STAFF: David N. Grove, Director; Sally Charuhus, Coordinator
Physical Therapist, Occupational Therapist, Speech Pathologist

CHARACTERISTICS OF TARGET POPULATION:

The target population for this project is the birth to 18-month-old infant who exhibits a handicapping condition. These conditions may include developmental delays, visual or hearing handicaps, motoric involvement, orthopedic impairments, neurological handicaps, and/or other health impairments. The infants in the program come from the Portland Tri-County area, southwest Washington, and eastern and southern Oregon. They are referred by physicians, local agencies, or parents.

PROGRAM FOR CHILDREN:

The program is designed to train parents to help their handicapped infants by teaching them specific therapy/intervention skills. For one to two hours a week, the infants and their parents attend the center-based program on an individual basis. The family works with a transdisciplinary team on individually prescribed activities. The parents follow the regimen at home and collect data on the infant's daily progress.

MEASURES OF CHILD PROGRESS:

The Bayley, Milani-Comparetti, REEL, SICD, and Erhardt Developmental Prehension Assessment are administered upon enrollment in the program and on a semiannual basis prior to major revisions of the IEP. Data collection systems are used by parents and staff to measure daily changes in behavior and skill acquisition.

PROGRAM FOR PARENTS:

The parents in the program actively participate in identification of their infant's strengths and weaknesses, documentation of progress, and implementation of the intervention programs. The parents are trained to provide the appropriate intervention techniques and to assume greater responsibility as they gain the necessary skills. In addition to participation in their infant's treatment, regular day and evening programs are presented to aid the family in understanding their child's development, intervention and data collection techniques as well as discussing various issues with invited speakers.

STAFF DEVELOPMENT:

Staff training needs are assessed semiannually following a comprehensive staff evaluation. University post-graduate classes, monthly inservice sessions and conferences are designed and attended depending upon the identified needs of individual staff members.

SUPPORT OR STIMULATION UNIT (SOS)

FISCAL AGENCY: Erie County Crippled Children's Society, Inc.

ADDRESS: 101 East Sixth Street
Erie, Pennsylvania 16507

PHONE: 814/459-2755
YEARS OF FUNDING: 1

PROJECT STAFF: Virginia Henry, Director; Jeff Barninger, Coordinator
Occupational Therapist, Educational Specialist, Social Worker, Secretary,
Physician

CHARACTERISTICS OF TARGET POPULATION:

Twenty-five infants (birth to 1) exhibiting all levels of handicapping conditions are eligible to receive services. The focus is on families from lower socioeconomic levels.

PROGRAM FOR CHILDREN:

This model integrates biomedical, interactional, interdevelopmental, and neuropsychological approaches with the following timeline framework: neonatal period from birth to 5 weeks, home period from 6 to 24 weeks, and home/agency period from 6 to 12 months. SOS develops and implements a hospital-based program for early identification, evaluation, and treatment of handicapping conditions in infants.

MEASURES OF CHILD PROGRESS:

Assessment measures include the Apgar, Brazelton, Early Intervention Developmental Profile, and Bayley. The evaluation is designed to measure progress secured by home training activities performed by parents and therapeutic tasks administered by professional staff.

PROGRAM FOR PARENTS:

A transdisciplinary team initiates family support and service immediately following the child's birth. The second phase of family support begins with a home-based program. The curriculum provides the parents with specific strategies that they implement, monitor, and record at regular intervals. Observations of the child's developmental progress and areas of specific need are made. A third level of involvement begins when the handicapped infant is well enough to be brought by the parents to the agency for infant and family therapeutic intervention.

STAFF DEVELOPMENT:

Following an initial orientation, a multi-faceted training system is implemented during the early months of the project to insure staff familiarization with human service concepts, infant development, current issues, and project strategies.

SPECIAL FEATURES OF PROGRAM:

The model provides a means for comprehensive evaluation of the handicapped infant.

INFANT/FAMILY PROJECT

FISCAL AGENCY: Montgomery Hospital

ADDRESS: Child Study Program
Montgomery Hospital
15 W. Wood Street
Norristown, Pennsylvania 19333

PHONE: 215/277-8181
YEARS OF FUNDING: 2

PROJECT STAFF: Frank Shaffer, Director; Barbara Evans, Coordinator
Child Development Specialist, Nurse, Teacher's Aide/Office

CHARACTERISTICS OF TARGET POPULATION:

The project serves 17 children (birth to 3) with known or suspected developmental delays or handicapping conditions in a noncategorical classroom.

PROGRAM FOR CHILDREN:

There are three components in the program for children: (1) neonatal assessment in the hospital nursery, (2) selective follow-up of the newborn by house visits, contact with the primary care physician, or appointments at the State Health Clinic, and (3) classroom activities for children with known or suspected developmental difficulties. The HICOMP curriculum is used to design individual lesson plans, and medical and other diagnostic services are available as needed.

MEASURES OF CHILD PROGRESS:

Infants enrolled in the classroom are assessed initially and semiannually with the Bayley, Gesell, or Stanford-Binet. The Brazelton is used for neonatal assessments in the hospital nursery, while post-Brazelton follow-up infants are given the Bayley every six months.

PROGRAM FOR PARENTS:

Project staff contact mothers in the prenatal clinic, at which time issues surrounding pregnancy and birth are discussed individually and in groups. In the hospital nursery, staff members demonstrate newborn abilities to mothers. Support in the parenting role is provided to parents of newborns selected for follow-up visits. Parent education groups are held for parents of children involved in the classroom.

STAFF DEVELOPMENT:

Staff development activities include meetings for case and project review and reports on conferences. The project director conducts staff training regarding the handicapping conditions seen in the program. Various specialists from outside the project are scheduled to address the project staff.

AN EDUCATIONAL SYSTEM IN PARENTING FOR THE RETARDED
WITH INFANTS AND TODDLERS (ESPRIT)

FISCAL AGENCY: Association for Retarded Citizens (ARC)-Allegheny

ADDRESS: 1001 Brighton Road
Pittsburgh, Pennsylvania 15233

PHONE: 412/322-6008
YEARS OF FUNDING: 1

PROJECT STAFF: Linda Sherman, Director
Administrative Assistant, Social Worker, Evaluation Designer, 3 Home Visitors

CHARACTERISTICS OF TARGET POPULATION:

The program serves 15 high-risk infants (birth to 3) and their retarded parents. The referral must be made prenatally or on or before 16 months of age. The child's parent(s) must be economically disadvantaged and of sub-average intellectual and adaptive functioning.

PROGRAM FOR CHILDREN:

The objective of the program is to foster normal development of the child. An IEP is developed which incorporates activities of the Portage Project. A home visitor models the implementation of the infant's daily program and adapts it to the skills of the parent, so that ultimately the parents will assume full responsibility for carrying out the program.

MEASURES OF CHILD PROGRESS:

The Early LAP is used for assessment at program entry and regularly throughout the project's duration to monitor skill acquisition. It serves as the basis for prescriptive programming. The Bayley is given at program entry and at yearly intervals to obtain precise data for the evaluation of the intervention.

PROGRAM FOR PARENTS:

The Home Training Program is based on an Individual Program Plan (IPP) for each parent. The IPP begins with a Strength/Needs Assessment and Parenting Skills Checklist which evaluates skills in the following areas: daily living, socialization and recreation, basic academics, language, and basic prenatal and/or continuing child care. Paraprofessionals work with families at home for a minimum of four hours per week. Additional hours are spent in small group work.

STAFF DEVELOPMENT:

The 8-week training course for paraprofessionals covers child development, health, safety, nutrition, stimulation and daily care, parent needs and developing task analyses.

SPECIAL FEATURES OF PROGRAM:

The project provides an innovative and replicable service system for a relatively unserved population and adapts parenting material for the needs of the retarded.

ST. JOSEPH'S EDUCATIONAL RECREATION PROGRAM FOR PRESCHOOLERS

FISCAL AGENCY: St. Joseph's Children's and Maternity Hospital

ADDRESS: 2010 Adams Avenue
Scranton, Pennsylvania 18509

PHONE: 717/346-7684
YEARS OF FUNDING: 3

PROJECT STAFF: Patrick McDonald, Director/Social Worker
Adaptive Equipper, Recreational Therapist, Physical Therapist, Special Education Teacher, Videotape Technician Secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves at least 24 multihandicapped, severely/profoundly retarded children (birth to 5) who are in residence at St. Joseph's Hospital.

PROGRAM FOR CHILDREN:

An individualized recreation program is provided for each preschooler during after-school hours and weekends. An interdisciplinary team composed of parents, a recreation therapist, a social worker, a physical therapist, a teacher, and a direct-care person plans and implements the program. A carpentry shop is staffed and equipped. The Adaptive Equipper adapts existing therapeutic equipment on-site for use by the children, constructs new equipment on-site, instructs parents on the adaption and construction of equipment, and is developing with staff a marketable booklet and kit.

MEASURES OF CHILD PROGRESS:

Instruments used to measure child progress include an adaption of the Pennsylvania Training Model, psychological evaluations, videotapes, and recreation participation log.

PROGRAM FOR PARENTS:

A family assistance program for parents and siblings includes orientation by the social worker through home visits and group sessions, parent training sessions both at home and at St. Joseph's, and parent participation in the recreation program.

STAFF DEVELOPMENT:

Staff development activities include weekly staff meetings for case and project review, staff reports on conferences and workshops, hospital inservices, and project visitation.

FAMILY SUPPORT CENTER

FISCAL AGENCY: Family Support Center

ADDRESS: 2 Bailey Road
Yeadon, Pennsylvania 19050

PHONE: 215/622-5660
YEARS OF FUNDING: 3

PROJECT STAFF: Yvonne L. Fraley, Director; Mary McCurdy, Coordinator
Clerical Staff, Nurse, Counselor, Social Worker, Parent Educator, Speech
Pathologist, Teacher

CHARACTERISTICS OF TARGET POPULATION:

The project serves young children (birth to 4), many at high risk, who are referred by community nurses and social workers from catchment area hospitals and Delaware County Child Welfare agencies.

PROGRAM FOR CHILDREN:

The program model has three components: (1) the Home-Based I program, serving infants aged 3 to 6 months, includes assessment, development of an IEP, and therapy, (2) the center-based program is a Family School offered two days a week for 13 weeks, in which both parents and children participate in an individually designed program based on the HICOMP curriculum with intensive help in speech and physical therapy, giving parents the opportunity to practice management techniques, (3) the Home-Based II program includes weekly home visits focused on teaching the parent to carry out the IEP at home.

MEASURES OF CHILD PROGRESS:

The Bayley, McCarthy and speech tests are administered within 10 weeks of the referral, after which Family School IEPs are written. Teachers note child progress weekly and update IEPs quarterly.

PROGRAM FOR PARENTS:

Parents participate in their child's developmental and behavioral training. Structured group experiences for building parental self-esteem, clarifying values, and increasing assertiveness skills are provided.

STAFF DEVELOPMENT:

Staff members participate in direct supervision. Workshops, designed according to the needs of the center and staff, are conducted every 13 weeks.

EARLY EDUCATIONAL OPPORTUNITIES FOR
PRESCHOOL HANDICAPPED CHILDREN

FISCAL AGENCY: Puerto Rico Department of Education

ADDRESS: P.O. Box 759
Hato Rey, Puerto Rico 00919

PHONE: 809/764-8059
YEARS OF FUNDING: 1

PROJECT STAFF: Awilda Torres, Director; Carmen Vazquez & Carmen Acosta, Co-Coordicators; 2 Teachers, 2 Teacher's Aides, Social Worker, Social Worker (part-time), Psychologist, Physical Therapist, Speech Therapist (part-time), Student Teachers

CHARACTERISTICS OF TARGET POPULATION:

Each of two sites (one in San Juan and one in Humacao) serves 15 children (3 to 8) who are severely handicapped. The San Juan center serves eight emotionally disturbed children and seven children with speech and language problems. The Humacao center serves 15 children with speech and language problems or who are hard of hearing.

PROGRAM FOR CHILDREN:

The program goal is to provide an effective educational program for handicapped preschool children geared towards lessening the child's dependency level and allowing the student to cope with formal educational settings in the regular school or in special educational programs. The Spanish-language version of the Portage Curriculum is used.

MEASURES OF CHILD PROGRESS:

The program provides a multidisciplinary evaluation of handicapped children and a post evaluation that assesses progress in the program.

PROGRAM FOR PARENTS:

The project coordinators and staff orient parents to the requirements of P.L. 94-142, assessing parent needs, carrying out individual interviews regarding educational evaluation and placement of their children, conducting parent group meetings, and developing training programs.

STAFF DEVELOPMENT:

Staff are provided with an orientation to the Portage Project materials. Inservice training is provided with workshops and seminars about P.L. 94-142, IEP development, child development, behavior modification, speech problems, evaluation and other topics. Student teachers from the University of Puerto Rico receive practical teaching experience at the sites.

SPECIAL FEATURES OF PROGRAM:

The two project sites serve as models of delivery in two different types of settings. San Juan is a demonstration in an urban, low-income setting; while Humacao is a demonstration for a rural population (though it is located on the campus of the Humacao College of Education, the University of Puerto Rico).

A MODEL DEMONSTRATION SERVICE DELIVERY CONTINUUM
FOR PRESCHOOL HANDICAPPED CHILDREN

FISCAL AGENCY: Rhode Island College, Bureau of Social and Educational Services

ADDRESS: Early Childhood Center
Chepachet School
Chepachet, Rhode Island 02814

PHONE: 401/568-4684
YEARS OF FUNDING: 3

PROJECT STAFF: Ruth H. Schennum & Judy Siegel, Co-Directors
Administrative Assistant, Psychologist, Speech Therapist, 4 Teachers, 3 Teaching Assistants, 38 Volunteer Educators, Physical Therapist, Occupational Therapist, Pediatrician, Audiologist, Otologist, Ophthalmologist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 40 children (3 to 6) with a wide range of handicapping conditions (mild to profound) and their families from the rural Northwest Special Education District.

PROGRAM FOR CHILDREN:

The Early Childhood Center operates four demonstration programs offering a continuum of complete diagnostic and educational services: (1) a self-contained, prescriptive classroom for 10 to 12 moderately to severely handicapped children; (2) an integrated classroom for eight nonhandicapped and eight mildly to moderately handicapped preschool children; (3) a home-based intervention program for 20 children with any type of handicapping condition; and (4) an integrated, cognitively-oriented classroom serving five mildly handicapped and 10 nonhandicapped preschool children.

MEASURES OF CHILD PROGRESS:

Prior to entry and after 10 months in the program, children are evaluated using normative instruments (e.g., McCarthy, Alpern-Boll, Templin Darley Test of Articulation, Houston Test of Language Development, and HOME). Criterion-referenced instruments specific to each of the four programs are used for evaluating and updating short-term objectives three times a year.

PROGRAM FOR PARENTS:

Parents are invited to participate in one or more of the following activities: assisting in the classroom, visiting the center for monthly observation, implementing educational objectives at home, serving on the Advisory Council, attending individual conferences regarding their child's progress, participating in group counseling sessions, and helping on field trips and parties.

STAFF DEVELOPMENT:

Internal staff development occurs on a monthly basis when the core evaluation team rotates through each model demonstration program. Staff meetings are held weekly, during which time external consultants often provide technical assistance.

SPECIAL FEATURES OF PROGRAM:

The range of diagnostic and program services offers the capability of matching the child's learning characteristics with the most appropriate, least restrictive learning environment.

OPEN HOUSE

FISCAL AGENCY: Providence Mental Health Center

ADDRESS: 160 Broad Street
Providence, Rhode Island 02903

PHONE: 401/274-7100
YEARS OF FUNDING: 2

PROJECT STAFF: Fredericka B. Bettinger, Director; Joanne Szamreta, Coordinator; Senior Remedial Assistant, 4 Remedial Assistants, Secretary

CHARACTERISTICS OF TARGET POPULATION:

The center serves single parents, low-income and isolated families, and families where there is a minimum of child-parent interaction. The children (birth to 5) of these households are considered at risk for developing learning disabilities and/or emotional handicaps.

PROGRAM FOR CHILDREN:

The program's primary goal is to train parents to stimulate their children's development and increase positive interaction. The staff works mainly in homes, although some group activities for parents and children are provided at the Mental Health Center.

MEASURES OF CHILD PROGRESS:

Instruments used during screening include the DDST and the HOME. The assessment process includes either the Bayley or McCarthy, a family history, and if indicated, a short-term diagnostic play group for the child. Other measures of child progress are being developed in-house.

PROGRAM FOR PARENTS:

Parent programming includes parent support groups, parent-child activity groups, and parent-assisted activity groups with their children. In addition, the staff provides home teaching sessions for mothers and children.

STAFF DEVELOPMENT:

Because Open House relies mainly on agency-trained paraprofessionals to provide direct services to families, the staff development component is particularly important. All staff members receive weekly individual supervision. They attend weekly study groups where social, observational, developmental, and educational objectives and skills are discussed. Paraprofessional staff members also receive weekly training seminars.

SPECIAL FEATURES OF PROGRAM:

Open House emphasizes the continuation of services for project families through various units of Providence Mental Health Center and other community health agencies.

PROJECT SCOOTER FOR HEARING IMPAIRED CHILDREN

FISCAL AGENCY: University of South Carolina
Department of Communicative Disorders

ADDRESS: 819 Barnwell
University of South Carolina
Columbia, South Carolina 29208

PHONE: 803/777-7876
YEARS OF FUNDING: 3

PROJECT STAFF: Joan Rollins, Director
Teacher/Specialist, Audiologist, Speech/Language Pathologist, Secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves 22 to 25 hearing impaired children (birth to 4) and their parents.

PROGRAM FOR CHILDREN:

Goals of the program include early identification of hearing loss and early educational intervention. The program is home-based for infants birth to 2 and center-based for children aged 3 to 4.

MEASURES OF CHILD PROGRESS:

Identification is made via a high-risk register in the hospital which detects children at risk for congenital hearing loss. The REEL, LAP-D, SKI*HI, and Language Development Scale are administered to the children. Audiological evaluations are conducted every six months.

PROGRAM FOR PARENTS:

Weekly home visits and monthly group meetings at the center constitute the crux of the program for parents. Parents are active in all aspects of the program; they participate in the toddler classroom, learn therapy techniques from project staff, and serve on the project Advisory Council.

STAFF DEVELOPMENT:

Attending monthly meetings, participating in planned training sessions, and auditing classes at the University of South Carolina are the primary staff development activities.

HARLEYVILLE EARLY LEARNING PROGRAM (HELP)

FISCAL AGENCY: South Carolina Department of Mental Retardation
Coastal Regional Center

ADDRESS: South Carolina Dept. of
Mental Retardation
Coastal Regional Center
Jamison Road
Ladson, South Carolina 29456

PHONE: 803/873-5750
YEARS OF FUNDING: 2

PROJECT STAFF: Rosemarie B. Gregory, Director
Special Education Teacher, Early Childhood Teacher, 2 Associate Teachers,
Social Worker, Clerk/Typist, Vehicle Operator, Clinical Counselor

CHARACTERISTICS OF TARGET POPULATION:

The project serves mildly and moderately mentally retarded and multihandicapped children (2½ to 8) for whom no appropriate program is available. The children reside in a rural area of the Coastal Region of South Carolina (Dorchester County).

PROGRAM FOR CHILDREN:

Two classrooms operate three hours per day, five days per week. A preparatory class prepares handicapped children for mainstreaming, while an integrated classroom serves nonhandicapped and handicapped children in a regular kindergarten program. The curriculum is based on High Scope's cognitively-oriented curriculum, which represents an attempt to construct a developmentally valid educational framework for children who are functioning in the Piagetian "preoperational" period of development.

MEASURES OF CHILD PROGRESS:

When a child is referred to the program, the Pre-Denver or Denver is used to determine if he or she has a developmental delay. If the results are positive, the child receives a complete diagnostic evaluation using the Stanford-Binet, Vineland, and Cattell. Upon entrance to the program the LAP is used to assess children in six skill areas.

PROGRAM FOR PARENTS:

Home-based training is provided to parents to assist them in teaching the skills recommended for their child by the education program. Inservice is provided for parents on child development, mental retardation, and specific child-rearing practices.

STAFF DEVELOPMENT:

Inservice training topics for project and LEA staff include: mainstreaming, handicapping conditions and how they affect learning, the High Scope curriculum, parent counseling, IEP development, administration of the LAP, and record keeping.

SPECIAL FEATURES OF PROGRAM:

This rural project is the first program in South Carolina to serve preschool handicapped children in a public school.

THE EARLY LIFESTYLE PROJECT

FISCAL AGENCY: The King's Daughters' School

ADDRESS: 412 West Ninth Street
Columbia, Tennessee 38401

PHONE: 615/388-3810
YEARS OF FUNDING: 1

PROJECT STAFF: Stephen W. Threet, Director; Pam Frakes, Coordinator
Administrative Assistant, Project Secretary, Classroom Teacher, Nurse,
Speech Therapist, Classroom Aides

CHARACTERISTICS OF TARGET POPULATION:

The project serves moderately to severely retarded children from a 6-county area in rural South Central Tennessee. Sixteen children (4 to 8) are served in two preschool classrooms at The King's Daughters' School. An additional 12 children (birth to 4) participate in a home-based infant education program.

PROGRAM FOR CHILDREN:

The Early Lifestyle Program is replicating the Preschool Classroom Model and the Infant Stimulation Model of the Norfolk Early Education for Handicapped Children Project (NEEHCP). The classroom curriculum is Norfolk's "Individuals in Groups." In addition, children have access to the resources of King's Daughters' School, including nursing care, swimming instruction, meals, and a transition service preparing the student for a successful move to the next educational environment. The Infant Stimulation Model features systematic training of parents to develop their teaching skills.

MEASURES OF CHILD PROGRESS:

The progress of the children in the Preschool Classroom Model is measured by the NEEHCP monitoring system. The primary data recording instrument is the Standard Daily Chart. The Denver Developmental Survey and the Vineland assess the progress of children in the Infant Stimulation Model.

PROGRAM FOR PARENTS:

Parents help develop their child's IEP by completing a "Goals for Your Child" sheet. They continually receive information about their child's teaching targets so that they may reinforce those skills at home. Parents work in the classroom as observers, data takers, and teaching assistants. Monthly parent/family nights are held.

STAFF DEVELOPMENT:

Project staff training in the models is conducted directly by and under the supervision of the Norfolk Outreach Project.

TECHNICAL EDUCATIONAL AIDS FOR CHILDREN WITH HANDICAPS

FISCAL AGENCY: Memphis City Schools

ADDRESS: 2597 Avery
Memphis, Tennessee 38112

PHONE: 901/454-5286
YEARS OF FUNDING: 2

PROJECT STAFF: Harold Perry, Director; Jeryl McCormick, Coordinator
Speech Pathologist, Occupational Therapist, Research Specialist, Therapy Assistant

CHARACTERISTICS OF TARGET POPULATION:

The project serves 10 physically handicapped children who are speech impaired as a result of a physical handicap and dependent in activities of daily living.

PROGRAM FOR CHILDREN:

The purpose of the project is to provide a system of assistive devices designed to enhance the educational opportunities for severely handicapped children. Enrolled in a school for physically handicapped children, each child attends the class most appropriate for his/her academic and developmental level and follows the curriculum specified in his/her IEP. The Rehabilitation Engineering Center designs communication and Aids to Daily Living (ADL) equipment which facilitates the educational progress of these children.

MEASURES OF CHILD PROGRESS:

Each child is administered the Technical Aid Evaluation to determine the needed communication and ADL equipment. Pupil academic achievement is periodically determined through analysis of standardized tests and informal teacher assessment data.

PROGRAM FOR PARENTS:

Parents are given a full explanation of the child's disabilities in regard to educational and social development. Parents receive individual training in the proper use and maintenance of the technical aids provided to the child.

STAFF DEVELOPMENT:

Weekly staff meetings are held to review program progress and evaluate child needs. Inservice training for classroom teachers is provided to allow teachers to develop new techniques for the implementation of technical aids in the classroom.

FAMILY, INFANT AND TODDLER PROJECT (FIT)

FISCAL AGENCY: George Peabody College of Vanderbilt University

ADDRESS: Box 151
Peabody College
Nashville, Tennessee 37203

PHONE: 615/327-8236
YEARS OF FUNDING: 2

PROJECT STAFF: Harris Gabel, Director; Judith A. Davis, Coordinator
4 Infant/Family Trainers (1 full-time, 3 part-time), Training Coordinator
(part-time), Program Evaluator (part-time), Secretary (part-time)

CHARACTERISTICS OF TARGET POPULATION:

The program serves 15 mentally retarded children (birth to 4) residing in rural areas of Middle Tennessee.

PROGRAM FOR CHILDREN:

A parent-implemented educational program is provided for each child in weekly clinics in rural communities. An individualized program of activities is developed in the following areas: gross motor, personal/social, hearing and speech, nonverbal communication, eye-hand coordination, and gestural and verbal imitation.

MEASURES OF CHILD PROGRESS:

Data are recorded weekly for target behaviors on checklists derived from developmental scales by Griffith and Uzgiris-Hunt. Yearly reevaluations make use of standardized measures such as the Bayley.

PROGRAM FOR PARENTS:

Parents participate in individual training sessions focused on implementing their children's educational programs. Parent groups provide information about child development and rearing and allow for a peer support system. A program for extended family members is being developed to give increased support to parents and children.

STAFF DEVELOPMENT:

Inservice training is provided during weekly staff meetings, special training sessions, meetings with consultants, and other periodic training activities.

SPECIAL FEATURES OF PROGRAM:

The FIT Project is based on the strategy of mobilizing, strengthening, and coordinating existing resources in rural areas, including families, allied professionals, and existing service agencies, in order to enhance the development of young mentally retarded children. Thus, in addition to the child and parent programs, an inservice training program is being developed for local allied professionals in rural communities to enable them to improve their services to the target population.

PROJECT FORSIGHT

FISCAL AGENCY: Texas School for the Blind

ADDRESS: 1100 West 45th Street
Austin, Texas 78756

PHONE: 512/451-6491
YEARS OF FUNDING: 3

PROJECT STAFF: Lee W. Robinson, Director
3 Parent Consultants/Teachers, Communication Specialist (.5), Secretary

CHARACTERISTICS OF TARGET POPULATION:

This project serves children (birth to 8 years of age) with a visual handicap and one or more additional handicaps from Austin and surrounding areas.

PROGRAM FOR CHILDREN:

Two kinds of instructional settings are used by the project. Home-based itinerant services provide assistance to parents, and center-based services assist professionals in the instruction of visually handicapped children. The Vision-Up Curriculum focuses on the areas of physical, fine motor, self-help skills, social-personal skills, language, and intellectual development. The curriculum is based on the theories of intellectual development taught by Jean Piaget. Instructional techniques from a variety of learning theories are used to increase the rate of learning of developmentally sequenced concepts.

MEASURES OF CHILD PROGRESS:

An initial assessment of each child is completed with the Vision-Up profile chart. This chart is updated at each home visit and instruction period. Reassessment occurs at 3-month intervals. Other measures, such as the DDST, Maxfield-Buchholz Scale for Preschool Blind Children, and Callier-Azusa Scales, are used to correlate and verify progress.

PROGRAM FOR PARENTS:

Parent participation is required during the assessment process, and parents are asked to instruct their children under the supervision of the parent consultants/teachers. Parents remain part of the assessment and evaluation process on an ongoing basis. Parents serve on the project's advisory council as consumers. In addition a parents' group has been established to help other parents become active in the use and support of the project.

STAFF DEVELOPMENT:

Assessment of staff needs is conducted by the project director and project administrator. Workshops, university courses, and technical assistance agreements are used to meet the training needs of project staff.

SPECIAL FEATURES OF PROGRAM:

The project functions out of a residential school for visually impaired children.

THE HANDICAPPED EARLY CHILDHOOD ASSISTANCE PROJECT

FISCAL AGENCY: Cameron-Willacy Counties Community Project, Inc.

ADDRESS: 940 East Washington
Brownsville, Texas 78520

PHONE: 512/546-3161
YEARS OF FUNDING: 3

PROJECT STAFF: Pedro Grimaldo, Director; Mary Cavazos, Coordinator
4 Resource Aides, Secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves 42 preschool handicapped children, birth to 3 years, with varying handicapping conditions.

PROGRAM FOR CHILDREN:

Individual programs are developed for each child through the use of educational evaluators/consultants. Prescriptive plans are written in English and Spanish to fully address the basic needs of the community. Of the children served, 98 percent are of Mexican-American heritage and over 95 percent of the parents speak and write only in Spanish.

MEASURES OF CHILD PROGRESS:

A number of testing procedures are used, including the DDST and Koontz. Each child is individually tested once every three months by a diagnostician. At this time a lesson plan is prepared for the child, based on his/her own developmental level. Thereafter, the child is seen once a week by the resource aide who works on a one-to-one basis with the child to develop his/her fullest potential. The Teaching Research curriculum is used.

PROGRAM FOR PARENTS:

Along with the training they receive in their homes, parents are provided with inservice training by the Red Cross, get-togethers with other parents for emotional support, and individual conferences pertaining to the development of their child. The project also provides parents with referrals to other community agencies.

STAFF DEVELOPMENT:

Training sessions are held twice a week to discuss individual cases and share experiences with one another. Relevant seminars are attended by one or more staff members in various parts of the country. Emphasis is placed on an understanding of the cultural and ethnic background of the children and families involved. In the future, more emphasis will be placed on training staff to work directly with parents since the project is highly committed to parental involvement.

SPECIAL FEATURES OF PROGRAM:

The program provides many services for the handicapped child. Underprivileged children are provided free medical care, transportation to and from local doctors' offices, and travel expenses if the child requires treatment from the area hospital. On an emergency basis, the project offers food, diapers, and medicine.

DEMONSTRATION OF TEACHING CONCEPTS FOR AUTISTIC CHILDREN

FISCAL AGENCY: Child Study Center

ADDRESS: 1300 W. Lancaster
Fort Worth, Texas 76102

PHONE: 817/336-8611
YEARS OF FUNDING: 2

PROJECT STAFF: Reba Walker, Director; Madalyn Teal, Coordinator

CHARACTERISTICS OF TARGET POPULATION:

The project serves five autistic or autistic-like children under 6 years of age, and their parents.

PROGRAM FOR CHILDREN:

The curriculum is based on Teaching Makes a Difference by Anne Donnelan-Walsh. The daily schedule is divided into 15- to 20-minute time slots which include language, perception, self-help skills, art, music, group activity tasks, and prevocational tasks through a total communication approach. Each child is provided with any related or ancillary services which are deemed necessary for his development.

MEASURES OF CHILD PROGRESS:

Each child is examined by the medical, psychological, and educational staff annually. Rimland's Diagnostic Checklist for Behavior-Disturbed Children, AAMD Adaptive Behavior Scale, the Bayley, and the Behavior Rating Instrument for Autistic Children are used to evaluate the child's development annually, as are other instruments as appropriate. IEPs are reviewed every 30 days and updated quarterly.

PROGRAM FOR PARENTS:

The parent program focuses on teaching the fundamentals of operant conditioning and social exchange so that the home environment can be therapeutic and educational. Group and individual therapy may be arranged as necessary to help parents cope with their reactions and feelings.

STAFF DEVELOPMENT:

Staff members are provided with the opportunity to attend conferences and meetings which will increase knowledge of skills related to teaching the autistic child.

PROJECT TRANSITION

FISCAL AGENCY: The Mental Health and Mental Retardation Authority of
Harris County

ADDRESS: 2501 Dunstan
P.O. Box 25381
Houston, Texas - 77005

PHONE: 713/526-2871
YEARS OF FUNDING: 2

PROJECT STAFF: Marlene Hollier, Director
Dissemination Strategist, 2 Educational Specialists, Secretary

CHARACTERISTICS OF TARGET POPULATION:

The project provides transitional services to ten children enrolled in early childhood education for the handicapped classes in two local public school districts. Children are mildly, moderately, and severely/profoundly retarded and multihandicapped. In the second half of the year, 30 additional children will be enrolled in the project. The children range in age from 3 to 5 years.

PROGRAM FOR CHILDREN:

Project Transition assists young children leaving infant programs for ECH classes in the public schools through provision of transitional support services. Project staff meet with public school personnel to provide assistance in determining appropriate placement and in developing the IEP. After the children are enrolled in ECH classes, project staff meet biweekly with the ECH teachers to provide curricular support and to monitor child progress. A transitional curriculum is being designed to provide ECH teachers with curriculum materials in a format similar to that in the MHMRA Infant Programs. These materials are developmentally based and sequentially ordered. The curriculum step-sheets provide for systematic data collection.

MEASURES OF CHILD PROGRESS:

Transition staff monitor child progress on the transitional curriculum only. Data are collected by the ECH teachers during each lesson in which the curriculum is used. Transitional staff meet biweekly with the ECH teachers to discuss child progress based on this data and possible revisions of the curriculum. Participating public school districts are responsible for administration of formal standardized instruments to measure child progress.

PROGRAM FOR PARENTS:

Services to parents are primarily informational in nature. Prior to the children's entry into ECH classes, project staff hold a number of parent meetings in which topics such as parental rights and responsibilities, IEPs, P.L. 94-142, parent-teacher communication, and parent organizations are discussed. A project staff member attends the child's initial staffing meeting with the parent(s). After the children are enrolled in ECH classes, project staff communicate with parents to inform them of local activities and programs of interest. The goal is to enable parents to become effective communicators with their children's ECH teachers rather than to rely on project staff for liaison assistance.

STAFF DEVELOPMENT:

Project staff participate in a minimum of four hours of inservice training monthly.

PROJECT FAMILY LINK I

FISCAL AGENCY: Texas Tech University

ADDRESS: Special Projects Division
Box 4170, Texas Tech University
Lubbock, Texas 79409

PHONE: 806/742-3296
YEARS OF FUNDING: 3

PROJECT STAFF: Mary Tom Riley, Director; Jamie Tucker, Coordinator
4 Home-Based Teachers, 3 Research Assistants

CHARACTERISTICS OF TARGET POPULATION:

The project serves 45 handicapped children, birth to 4 years of age, who reside in one of 10 designated rural counties around Lubbock, Texas.

PROGRAM FOR CHILDREN:

Home intervention is based on the Portage Project Model. During weekly home visits, developmentally appropriate activities for the child are demonstrated to the parents, who carry out the activities during the week. Other services include linking families to needed services (health, social, educational, medical, etc.) and acting as a liaison between families and service agencies.

MEASURES OF CHILD PROGRESS:

Children are assessed on a pre- and posttest basis with the Portage Checklist and the Alpern-Boll. Other instruments, such as the Bayley and the Slosson, are also used. Daily child progress is recorded by the parents on activity sheets, which are collected by home-based teachers each week. This data is used in planning further activities.

PROGRAM FOR PARENTS:

In addition to parental involvement in home-based teaching, Family Link I holds six family days a year. Families are transported to the project site for a day of planned activities, lunch, and interaction with other families. The Family Album is also considered part of the family program.

STAFF DEVELOPMENT:

Preservice staff development includes training in the implementation of the Portage Model. Inservice staff development occurs on an ongoing basis through individual conferences with the coordinator, weekly staff meetings, and scheduled presentations by consultants on topics relating to handicapped children, home-based teaching, and other relevant areas determined by the coordinator and/or home-based teachers. Staff members also attend conferences relating to the education of young handicapped children.

SPECIAL FEATURES OF PROGRAM:

The use of paraprofessionals as home-based teachers is more cost-effective in the large geographic region served. Teachers are indigenous to the area served, and bilingual teachers are employed. Each family is provided with a 15" x 12" scrapbook which is used as the family's personal record of their experience in Project Family Link I. Each week, home-based teachers take snapshots and deliver pictures from the preceding week. The album contains sections relating to home visits, family friends, family fun, and the family history.

ADAPTIVE PHYSICAL EDUCATION PROGRAM PROVIDING
YOUNG KIDS INDIVIDUALIZED DEVELOPMENTAL SERVICES
(A PEPPY KIDS PROJECT)

FISCAL AGENCY: Las Palmas Young Women's Christian Association

ADDRESS: 503 Castroville Road
San Antonio, Texas 78237

PHONE: 512/434-7033
YEARS OF FUNDING: 1

PROJECT STAFF: Sylvia E. Schmidt, Director
Social Worker

CHARACTERISTICS OF TARGET POPULATION:

Children range from birth to 8 years of age, with moderate to severe mental retardation, hearing, visual, speech, orthopedic, or other health impairments. Most children are bilingual. Fifteen children are being served during the first year, with plans for 30 during the third year.

PROGRAM FOR CHILDREN:

Services include aquatics, child care, recreation programs, motor and physical fitness activities, and summer day camp. The first two components utilize Portage curriculum materials and the Alaska Waterbag Swimming Skills materials.

MEASURES OF CHILD PROGRESS:

The initial screening device is the DDST. Pre and post assessments include the Guide for Evaluating Children's Progress (from the Southeastern Day Care Project) and Portage Skills checklists.

PROGRAM FOR PARENTS:

Parents are provided with these services: physical fitness, parenting skills training, adult education classes, participation in child care inservice training sessions, information and referrals for respite care, and child care for 3- to 5-year-olds.

STAFF DEVELOPMENT:

Staff development activities include inservice staffings, field site visits to agencies serving handicapped children, lectures and discussions, role playing, college classes at San Antonio College, and Handicapped Children's Aide Training Program (Project PASE).

SPECIAL FEATURES OF PROGRAM:

The program features adaptive physical education with emphasis on sensorimotor skill development, services for siblings and parents in ongoing YWCA recreation programs, and support groups for families.

PROJECT SEARCH

FISCAL AGENCY: Silsbee Independent School District

ADDRESS: 415 W. Avenue N.
Silsbee, Texas 77656

PHONE: 713/385-5286
YEARS OF FUNDING: 1

PROJECT STAFF: Jimmye Gowling, Director
Registered Nurse, Speech and Language Therapist, Teacher, Secretary,
Diagnostician

CHARACTERISTICS OF TARGET POPULATION:

The project serves 15 preschool children, birth through 5 years, who exhibit physical and mental disabilities or specific developmental delays.

PROGRAM FOR CHILDREN:

The program for the children is child-centered. The individualized therapy and instructional programs have special emphases in the areas of language, motor, personal-social and problem solving skills. In addition, referrals to other professional sources are made for such related services as physical therapy, otological, neurological, orthopedic, psychological and medical services. Immunization clinics, in cooperation with the county health department, are also provided.

MEASURES OF CHILD PROGRESS:

The DDST is used initially to determine the child's abilities. Within 45 days, eligibility is determined utilizing the Bangs Birth-to-Three Scales and the McCarthy. Quarterly progress is measured by teacher-made tests and/or Portage Behavior Checklist. Annual re-evaluation is done during the month of May to determine progress and appropriateness of program.

PROGRAM FOR PARENTS:

Parent involvement includes active participation in the instructional activities, home activities, special topical workshops, parent meetings and the Parent Advisory Council.

STAFF DEVELOPMENT:

Inservice training includes an orientation to the project's philosophy, films and filmstrips concerned with diagnosis of handicapping conditions and techniques for remediation of disabilities, site visits to medical or other facilities which serve young handicapped, workshops dealing with parents and infants, participation in local, state and national professional groups and conferences, weekly staff meetings, and access to the project professional library. Role playing activities are used to reinforce interpersonal skills.

SPECIAL FEATURES OF PROGRAM:

All direct service activities for children and parents are conducted in a special mobile classroom which travels to the child's home or neighborhood. All equipment and supplies needed for these activities are maintained on the mobile unit.

UTAH PROGRAM FOR AUTISTIC CHILDREN (UPAC)

FISCAL AGENCY: Utah State Department of Social Service

ADDRESS: 668 S. 13th East
P.O. Box 2500
Salt Lake City, Utah 84110

PHONE: 801/581-0103
YEARS OF FUNDING: 1

PROJECT STAFF: Richard Baer, Director
2 Parent Teachers, 3 Relief Parent Teachers

CHARACTERISTICS OF TARGET POPULATION:

The project serves five autistic and autistic-like children ages 3 to 8 years.

PROGRAM FOR CHILDREN:

Children in the program attend a special school program five days a week. In addition, they are housed in a teaching home four days per week. The school and teaching home staffs combine their efforts to teach language, motor, self-help and cognitive skills appropriate for each child's development level.

MEASURES OF CHILD PROGRESS:

Measurement instruments include the Bayley, Stanford-Binet, AAMD Adaptive Behavior Scales, California Preschool Social Competency Scale, REEL, and Vineland. Autism screening instruments are used for educational planning. Criterion-referenced tests have been developed by the project to cover language, motor, self-help, social, cognitive and behavioral skills.

PROGRAM FOR PARENTS:

The needs of parents are assessed individually as the child enters the program, and a program for meeting those needs is developed.

STAFF DEVELOPMENT:

Staff development activities include an orientation to the project and the HCEEP network, weekly staff conferences, visits to other programs and participation in or attendance at various state, regional, and national conferences.

MODEL CHILD DEVELOPMENT PROJECT FOR SEVERELY
HANDICAPPED CHILDREN, AGES BIRTH TO FIVE YEARS

FISCAL AGENCY: Rutland Mental Health Services, Inc.

ADDRESS: Box 222
Rutland, Vermont 05701

PHONE: 802/775-2381
YEARS OF FUNDING: 1

PROJECT STAFF: David R. Ritter, Director
Parent Specialist (Psychiatric Social Worker), 2 Early Child Development
Specialists, Head Teacher, Assistant Teacher, Project Psychologist/Therapist

CHARACTERISTICS OF TARGET POPULATION:

The Pilot Parent component serves 10 families of newborn handicapped children, the Infant Stimulation component serves 12 children, and the Therapeutic Preschool component serves six children. All children present either severe handicaps or serious emotional/behavioral disorders and are between the ages of birth and 5 years.

PROGRAM FOR CHILDREN:

The Infant Stimulation component employs a home-based, parent-training approach to deliver services to severely handicapped children ages birth to 2 years, and also has the capability to serve children ages 3 to 5 years. The main goal of this component is to involve and train parents to interact with and stimulate their child. The Therapeutic Preschool incorporates a therapeutic milieu in serving seriously emotionally or behaviorally disordered children ages 3 to 5 years. The primary focus of this component is the child's social/emotional development and intervention for maladaptive behaviors.

MEASURES OF CHILD PROGRESS:

Both norm- and criterion-referenced measures are used to assess progress in cognitive, language, motor, and social/emotional growth. Videotape is used to pictorially assess child progress.

PROGRAM FOR PARENTS:

The Pilot Parent component involves a cadre of 10 pairs of well-adjusted parents of handicapped children who provide training, support, and advocacy to parents of newborn handicapped children. Within the Infant Stimulation and Preschool components, parents participate in the delivery of educational and therapeutic services.

STAFF DEVELOPMENT:

Staff development includes philosophical orientation to the concepts of normalization and competency-deviancy via Gold's "try another way" approach. Members of individual program components receive specific training based upon assessed needs.

CHESAPEAKE HOME INTERVENTION CLINICAL SCHOOL PROGRAM (CHICS)

FISCAL AGENCY: Chesapeake Public Schools, Pupil Personnel Services,
Special Education Department

ADDRESS: 2107 E. Liberty Street
Chesapeake, Virginia 23324

PHONE: 804/547-6143
YEARS OF FUNDING: 3

PROJECT STAFF: W. A. Butler, Director; Genoa McPhatter, Coordinator
Early Stimulation Specialist, Speech/Language Specialist, Physical Therapist,
Occupational Therapist, Curriculum Specialist/Parent Coordinator

CHARACTERISTICS OF TARGET POPULATION:

The project serves 30 children (birth to 3) with one or more of these conditions: mental deficiency, neuromotor dysfunctions, minimal brain dysfunctions, birth weight, convulsive seizure disorders, communication disorders, visual and auditory disorders, autistic, psychotic, and other disturbed behaviors.

PROGRAM FOR CHILDREN:

The learning environment is a clinical school-based setting in which the children receive physical, occupational, and/or speech therapy, with emphasis on diagnostic and remedial techniques. The curriculum design is comprehensive and individualized. The home intervention component involves teaching the parents to assess the child's needs, teach new skills, evaluate the progress of the child, and utilize educational materials to enhance the child's development.

MEASURES OF CHILD PROGRESS:

Each child in the program is measured for baseline performance. This consists of charting direct observational behavior and/or noting progress on the test instrument to pinpoint, in behavioral terms, each behavior to be treated. Instruments used include the LAP, Binet, Developmental Activity Screening Inventory, Virginia State Comprehensive Developmental Scale, Alpern-Boll, REEL, Goldman-Fristoe Test of Articulation, Milani-Comparetti, California Sensory Motor Integration Scale, PPVT, Utah Test of Language Development, and informal assessments.

PROGRAM FOR PARENTS:

The program includes a thorough orientation to the program design and regular attendance at informative meetings. Each parent enrolled is required to participate directly in scheduled clinical activities with her child. A lending library of toys, books, and equipment associated with developmental stages is provided. A small mother-child group within the clinic allows mothers to exchange their ideas and experiences as well as to observe other children.

STAFF DEVELOPMENT:

Staff development activities include updating staff members about procedures within the program and the evaluation system utilized with each child. Training objectives are reinforced through staff observation and participation in weekly interdisciplinary conferences, staff meetings and cooperative enterprises with nearby programs.

SPECIAL FEATURES OF PROGRAM:

Local university students participate in the program as student teachers. Periodic observations by the students are also made.

RICHMOND EARLY CHILDHOOD EDUCATION PROJECT (RECEP)

FISCAL AGENCY: Virginia Commonwealth University

ADDRESS: 2096 Oliver Hall
Virginia Commonwealth University
Richmond, Virginia 23284

PHONE: 804/257-1305
YEARS OF FUNDING: 1

PROJECT STAFF: John Filler, Director; JoAnn Marchant, Coordinator
4 Teachers (2 Project, 2 Public School), 3 Aides, Occupational Therapist/
Parent Coordinator, Project Evaluator, Public School Consultants

CHARACTERISTICS OF TARGET POPULATION:

Twenty-five Richmond children (birth to 6) who are severely or profoundly handicapped are served by the project.

PROGRAM FOR CHILDREN:

Children aged 2 to 6 attend Richmond Public School classes for the severely/profoundly handicapped and are visited twice a month in their homes by teachers and specialty personnel. Ten infants attend a school-based program two days a week, in addition to receiving two home visits per week. The curriculum is derived from the Minimal Objective System (MOS). Much emphasis is placed on parents as teachers of their children.

MEASURES OF CHILD PROGRESS:

Members of the public school evaluation team annually evaluate project children with standardized measures such as the Stanford-Binet and Cattell. Infants are evaluated on the Uzgiris-Hunt or Bayley by project staff. MOS provides a comprehensive educational assessment and serves as a criterion-referenced tool for summative evaluation.

PROGRAM FOR PARENTS:

Parents are involved in the planning, implementation, and evaluation of their child's IEP and specify their role in the educational process through their corresponding Parent Involvement Plan. Parents are trained to work with their child from the MOS, with emphasis on solving problems they encounter in maintaining their child at home.

STAFF DEVELOPMENT:

Intensive training is provided in periodic workshops. These workshops include informational and competency pre- and posttest measures for both professional and paraprofessional staff. Staff members document their attainment of competencies utilizing the Parent/Staff Training Profile.

SPECIAL FEATURES OF PROGRAM:

This transdisciplinary project emphasizes the advisory role of the therapist and other ancillary personnel. The project is a joint endeavor of Virginia Commonwealth University and Richmond Public Schools.

A NONCATEGORICAL EARLY CHILDHOOD PROGRAM
FOR HANDICAPPED CHILDREN

FISCAL AGENCY: Fairfax County Public Schools, Special Education Division

ADDRESS: 7101 Old Keene Mill Road
Springfield, Virginia 22150

PHONE: 703/451-7140
YEARS OF FUNDING: 3

PROJECT STAFF: Clay Sande, Director; Irene Nassor, Coordinator
4 Primary Teachers, 4 Aides, 3 Preschool Teachers, 3 Aides, Home Resource Teacher, Program Development Teacher

CHARACTERISTICS OF TARGET POPULATION:

The project serves children (2 to 4) who exhibit any mild to severe handicapping condition and children (5 to 8) with mild to moderate handicapping conditions.

PROGRAM FOR CHILDREN:

Program goals include the integration of special education and regular elementary settings, the provision of a systematic approach to mainstreaming in schools, and the provision of a comprehensive program for 2- to 8-year-olds in regular elementary classrooms. The program is primarily center-based, with the exception of the home-based program for 2-year-olds.

MEASURES OF CHILD PROGRESS:

The McCarthy and the Alpern-Boll are administered for the purposes of summative and formative evaluation data.

PROGRAM FOR PARENTS:

The program for parents includes monthly parent sharing groups and workshops, quarterly workshops on curriculum, and home visits by staff teachers.

STAFF DEVELOPMENT:

Meetings for staff are held weekly, utilizing a multidisciplinary team approach. Planned training sessions and workshops are also conducted for staff members.

PROVIDENCE PROJECT

FISCAL AGENCY: Providence Hospital

ADDRESS: P.O. Box 1067
Everett, Washington 98206

PHONE: 206/258-7311
YEARS OF FUNDING: 1

PROJECT STAFF: Shirley J. Lemmen, Director
Early Childhood Specialist, 2 Paraprofessionals, Clinic Nurse Specialist

CHARACTERISTICS OF TARGET POPULATION:

The project serves children from birth to 3 years of age who are handicapped, developmentally delayed, or "at risk" for developmental delay.

PROGRAM FOR CHILDREN:

Children may be included in group sessions, a home-based program, individual therapy or a combination of these.

MEASURES OF CHILD PROGRESS:

Each child receives an Initial Comprehensive Evaluation by a team comprised of a neurologist, pediatrician, orthopedist, physical therapist, occupational therapist, CDS, nurse, and social worker. Re-evaluations occur periodically. The HELP Activity Guide is used to monitor classroom growth.

PROGRAM FOR PARENTS:

Parent involvement is a major emphasis of the program. The HELP Activity Guide and Charts are utilized as a strategy to involve parents in assessment, goal identification and IEP development for their child.

STAFF DEVELOPMENT:

Inservice training sessions are held once or twice a week. Staff meetings are utilized as a means to integrate the Providence Project into the ongoing program in the Pediatric Developmental Treatment Center at Providence Hospital.

SPECIAL FEATURES OF PROGRAM:

Providence Hospital and Everett School District are collaborating on developing service integration in the community.

HOME-BASED PRESCHOOL

FISCAL AGENCY: Ferndale School District #502

ADDRESS: P.O. Box 698
Ferndale, Washington 98248

PHONE: 206/384-3591
YEARS OF FUNDING: 3

PROJECT STAFF: Tyrone Knutson, Director; Robert Diaz, Coordinator
4 Home Instructors, Communication Disorders Specialist (.50), Consulting Services of Special Education Staff

CHARACTERISTICS OF TARGET POPULATION:

Thirty-five to 40 children (ages 3 to 8), residing in rural Whatcom County, have been identified by the following criteria from the Alpern-Boll: any child in the "significant retardation" column in any one of the five skill areas, or in the "borderline range" in two or more of the five skill areas.

PROGRAM FOR CHILDREN:

The program is designed to increase cognitive, self-help, perceptual motor, social, and language skills and to decrease behavior problems through parent teaching and management skills. An individualized education program is developed by a multidisciplinary team with parent participation. Home instructors work on a one-to-one basis with the child in the home for at least one hour a week while the parent observes and models the lesson. Specific activities are left with the parent to implement for at least 10 minutes daily. Supplementary services are provided by community agencies.

MEASURES OF CHILD PROGRESS:

The Alpern-Boll is administered initially as a screening device and pretest. The McCarthy is used as a pre- and posttest on a yearly basis. The Vocabulary Comprehension Scale is administered when the child enters the program and at 6-month intervals to provide a cumulative indicator of child progress in the area of language. Random language samples are tape recorded every six months. The Preschool Profile is used as a yearly pre and post measure to graphically display child progress to parents.

PROGRAM FOR PARENTS:

Parents are encouraged to participate in all aspects of the program. Two or more parents are on the Advisory Council. Through home visits, the teachers work with parents to increase their teaching skills, understanding of behavior management, and ability to follow the child's individualized program. The parent is encouraged to discuss with the home instructor, coordinator, or parent group any problems she/he has in understanding and coping with the child's handicap. The parent is encouraged to contribute to the planning and evaluation of the program. Parents are informed of community services and classes available to them which would be of benefit.

STAFF DEVELOPMENT:

A needs assessment determines the 2-week inservice training. Staff are oriented to the project goals, services and community resources available. Ongoing training is based upon staff needs.

THE MODEL PRESCHOOL PROJECT

FISCAL AGENCY: Educational Service District 101

ADDRESS: Special Services
W. 1025 Indiana Avenue
Spokane, Washington 99205

PHONE: 509/456-7086
YEARS OF FUNDING: 2

PROJECT STAFF: Candy Baker, Director
Psychologist, Teachers, Physical Therapists, Occupational Therapists,
Training Coordinator, Speech/Language Therapist, Aides

CHARACTERISTICS OF TARGET POPULATION:

Forty handicapped preschool children birth to 5 years of age are served. A variety of handicapping conditions are present which may include neurological impairments, gross motor handicaps, moderate to severe mental retardation, speech/ language impairments, and Down's syndrome as a primary focus.

PROGRAM FOR CHILDREN:

The educational program replicates the University of Washington's Model Preschool Center for Handicapped Children. Children receive instruction in the areas of cognitive/preacademic skills, gross and fine motor skills, general language skills, and social/self-help skills. They also receive support services as needed. In addition to the daily (four hours) classroom program, an infant learning program is conducted for parents and infants during a weekly 30- to 60-minute session.

MEASURES OF CHILD PROGRESS:

Primarily three developmental instruments are used as pre- and posttests. The Down's Syndrome Performance Inventory is used at two of the project sites, the Panhandle Developmental Scale at another, and the LAP at the fourth site. The primary purpose of the instruments is to provide a systematic approach to assessing each child's skills at the time of program entry and throughout the year.

PROGRAM FOR PARENTS:

Parents are encouraged to participate in all aspects of their child's program. They are an important part in setting appropriate and useful goals for the children. They are trained to supplement the implementation of the IEP by conducting home programs and to work in the classroom as aides. Parents serve as members of the advisory council, are encouraged to attend inservice presentations and are kept abreast of current happenings within their child's program site via a newsletter which is distributed approximately every other month.

STAFF DEVELOPMENT:

Project staff receive inservice training from a variety of sources including the University of Washington's Model Preschool Center, WESTAR, RTAC, and model preschool staff members. Monthly inservice is offered to the staff and available to parents if requested.

SPECIAL FEATURES OF PROGRAM:

Currently the program operates in three unique settings: public schools, a day care center, and a private school setting.

CHILDREN WITH HANDICAPS IN ACCOUNTABLE RURAL TEACHING (CHART)

FISCAL AGENCY: University Affiliated Center

ADDRESS: 311 Oglebay Hall
West Virginia University
Morgantown, West Virginia 26506

PHONE: 304/293-3303
YEARS OF FUNDING: 1

PROJECT STAFF: John D. Cone, Director; Annette Hanson, Coordinator
Teacher, Classroom Assistant

CHARACTERISTICS OF TARGET POPULATION:

The program serves six to eight preschool children (3 to 6) from rural Preston County who are moderately to profoundly multiply handicapped.

PROGRAM FOR CHILDREN:

Children are served in a combined center- and home-based program indigenous to the public school system. The program completes a gap in the continuum of services from birth to adulthood and is closely integrated with already existing public school services. The curriculum, the West Virginia System, is a diagnostic-prescriptive, behaviorally based program containing 5,200 precisely worded objectives and an equal number of direct instructional teaching plans.

MEASURES OF CHILD PROGRESS:

Program eligibility is determined by formal, norm-referenced instruments administered by community mental health center and/or school district personnel. Summative educational evaluations are conducted prior to program entry and at 6-month intervals thereafter using the criterion-referenced West Virginia Assessment and Tracking System, which is correlated with the curriculum and cross-referenced item by item to numerous other measures (e.g., LAP, EMI, Camelot, Behavioral Checklist Profile). Formative assessment is done daily using the autographing Universal Data Sheet.

PROGRAM FOR PARENTS:

A 3-level parent/family involvement program includes group meetings, participation in the home enrichment and classroom volunteer programs, and formal parent training in using the model curriculum at home.

STAFF DEVELOPMENT:

Classroom personnel are pretested for skills in assessment, IEP development, curriculum design, direct instruction, formative evaluation, managing effective parent/family involvement, and knowledge about the HCEEP. Individualized Inservice Educational Plans are developed, and the staff is trained to mastery in each area.

PROJECT REECH

FISCAL AGENCY: Monroe County (West Virginia) Board of Education

ADDRESS: P.O. Box 330
Union, West Virginia 24983

PHONE: 304/772-3095
YEARS OF FUNDING: 3

PROJECT STAFF: Henry F. Lynn, III, Director
3 Teachers, Teacher Aide, Parent Educator, Secretary (part-time)

CHARACTERISTICS OF TARGET POPULATION:

REECH serves 63 Appalachian children (3 to 7) in Head Start, kindergarten, transitional first grade, and home-based placements. All children are handicapped or potentially handicapped.

PROGRAM FOR CHILDREN:

Handicapped children are served in a total mainstreaming program which is both home- and school-based. Three- and 4-year-old children are served by a home trainer who utilizes precision teaching techniques and parent instruction to fulfill IEP objectives based on assessment with the LAP, McCarthy, and the Test of Language Development. Older children (5 to 6) receive center- and home-based training to meet developmental needs assessed by the LAP, as well as school readiness needs.

MEASURES OF CHILD PROGRESS:

The Test of Language Development is administered as a pretest for diagnostic purposes. The McCarthy Scales and the Arizona Articulation Proficiency Scale are administered annually as pre-post instruments. The LAP is used as an ongoing assessment, with developmental levels calculated three times a year.

PROGRAM FOR PARENTS:

Parents are provided with individual programs to meet needs identified by the administration of the Developmental Parenting Skills Profile, an instrument being developed by the project which assesses parent needs in the areas of interpersonal interaction, knowledge of child development, utilization of community resources, school readiness training techniques, and precision teaching techniques for home training of handicapped children. Individual Parenting Plans are written for each parent identified as having individual training needs. In addition, group parent classes are offered.

STAFF DEVELOPMENT:

Paraprofessionals are provided training on an ongoing basis. Professional staff receive ongoing training at weekly staff meetings. In addition, a college-level course on teaching young handicapped children is offered in the schools for project staff, parents, and other interested persons.

SPECIAL FEATURES OF PROGRAM:

Project REECH functions completely within the existing facilities of a low-income rural school district, and children are served in totally mainstreamed settings. Annual cost per child for intervention services was only \$1,100 during the first year of operation.

RURAL INFANT STIMULATION OUTREACH ASSISTANCE PROJECT

FISCAL AGENCY: The University of Alabama

ADDRESS: Area of Special Education
 P.O. Box 2592
 University, Alabama 35486

PHONE: 205/348-7340 & -7931
YEARS OF OUTREACH FUNDING: 3

PROJECT STAFF: Loreta Holder, Director; Sheila Spivey, Coordinator
 Speech Pathologist, Parent Trainer, Registered Physical Therapist, 3 Teachers, Occupational Therapist, 5 Aides

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
 The University of Alabama

DESCRIPTION OF DEMONSTRATION MODEL:

The RISE Program serves multihandicapped children ranging in age from birth to 3 who reside within the Tuscaloosa area. Three classroom programs, serving 26 children, employ a developmental approach based on the RISE Assessment Instrument and supplemental materials. The center serves as a training site for parents of multihandicapped children, staff members of centers in the southeast region, and students at the University of Alabama.

MAJOR OUTREACH OBJECTIVES:

The program trains direct care personnel who provide comprehensive programming to multihandicapped children and their families in the state of Alabama. The unique aspect of RISE Outreach assistance is Developmental Physical Management Techniques, a training program incorporating materials from physical and occupational therapy, early childhood education, special education, speech, and adaptive physical education. Included in the program are methods of proper handling, management, and positioning that facilitate optimal motor development and prevent undesirable motor patterns. Training is accomplished through formal presentations, observation of assessments, and participation in program planning.

ACCOMPLISHMENTS DURING 1979:

The major emphasis of the program is the training component. The RISE program conducted training sessions in each of the 34 sites and in 35 workshops. The program also sponsored the Cerebral Palsy Institute with 148 participants from throughout the United States. The RISE program served as a regional training site for the Curative Workshop of Milwaukee. Another major component of RISE is the assessment, programming, and follow-up segment. Two hundred seventy multihandicapped children were provided services as a result of this effort.

These project-developed materials are available: (1) Developmental Physical Management Techniques for the Multidisabled Child (Manual); (2) Talking Time is All the Time (Manual); (3) slide presentations ("Oral Reflexes in the Infant," "Pre-Speech and Feeding Techniques to be Used with the Child with Cerebral Palsy"); (4) videotape presentation ("Do's and Don'ts of Handling and Positioning the Child with Cerebral Palsy").

- Number of people trained: 562
- Number of sites using model components: 34

PROJECT FIRST CHANCE INTERACTIVE OUTREACH MODEL

FISCAL AGENCY: University of Arizona

ADDRESS: Dept. of Special Education
College of Education
University of Arizona
Tucson, Arizona 85721

PHONE: 602/626-3248

YEARS OF OUTREACH FUNDING: 1

PROJECT STAFF: Jeanne McCarthy, Director; Kathryn Lund, Coordinator
Master Teacher/Trainer, Paraprofessional/Trainer, Home Teacher/Trainer,
Curriculum AdapterSOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Public school flow through 94-142 (LEA)

DESCRIPTION OF DEMONSTRATION MODEL:

Project First Chance has developed a curriculum which combines cognitive, developmental, and behavioral philosophies. The emphasis on language and pre-academics reflects a cognitive approach. The instructional methodology reflects the behavioral approach. All components of the model are orchestrated including assessment, curriculum, and evaluation.

MAJOR OUTREACH OBJECTIVES:

The project's outreach objectives are to:

- Stimulate the development of systematic educational services to preschool handicapped children and their families.
- Continue the model demonstration center in Sunnyside School District as a training and dissemination facility.
- Participate in a major public awareness campaign planned by the SEA as part of the SIG activities.
- Continue to conduct conferences and workshops in and out of state on model services.
- Follow-up contacts with specific target agencies interested in implementing the model.

ACCOMPLISHMENTS DURING 1979:

During 1979, the project established an outreach office and staffed the outreach project. Three visits were made to the Nebraska replication site, and two Nebraska site staff members visited Project First Chance. In addition, the project served as host for visits by two Texas site staff and by two educational service center staff.

The project has available these materials: assessment manual, curriculum, systematic data processing manual, and an inservice training manual.

- Number of people trained: 42
- Number of sites using model components: 5

JDRP-APPROVED AS OF JANUARY 1, 1980: No

EARLY CHILDHOOD EDUCATION, REVERSE MAINSTREAM PROJECT

FISCAL AGENCY: Los Angeles Unified School District (LAUSD)

ADDRESS: 1925 S. Budlong Avenue PHONE: 213/731-7664
Los Angeles, California 90007 YEARS OF OUTREACH FUNDING: 6

PROJECT STAFF: Pat Estes, Director; Addie Moore, Coordinator
Early Childhood Consultant, Rotating Substitute Teacher, Child Development Specialist, Music Consultant, Project Development Consultant, Project Evaluator

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Los Angeles Unified School District

DESCRIPTION OF DEMONSTRATION MODEL:

The model program integrates nonhandicapped children into an LAUSD special school program for 3- to 12-year-old physically handicapped children. The ungraded class modules demonstrate the DEAL model of both an open-structured classroom environment in the option period and teacher selected instructional plans in formal time. Child progress is determined by district approved assessments and accomplishment of IEP goals.

MAJOR OUTREACH OBJECTIVES:

Outreach objectives are to:

- Maintain project model (described above).
- Demonstrate appropriate learning environments for young children in a mainstream setting, and provide practical experiences for trainees in this setting.
- Provide training and consultation services to LAUSD and the community at large in meeting needs of young handicapped children.
- Coordination with local, state, and federal agencies.
- Make available project-developed materials.

ACCOMPLISHMENTS DURING 1979:

Staff conducted 12 one-week training sessions, led 10 staff development sessions for special education schools, provided ongoing consultation to 32 teachers at 14 special education schools, conducted 30 orientation sessions at the model program, participated/presented at seven conferences/workshops, and sent information about the program to 68 persons/programs at their request.

The project's materials include: Guidebook to DEAL, movies, filmstrip, cassettes, and a loose-leaf training packet.

- Number of people trained: 207
- Number of sites using model components: 15 special education schools. Head Start and Children Center Site count not available.

JDRP-APPROVED AS OF JANUARY 1, 1980: No

CASA COLINA OUTREACH SERVICE LINKAGE PROJECT

FISCAL AGENCY: Casa Colina Hospital for Rehabilitative Medicine

ADDRESS: Children's Services Center
Casa Colina Hospital
255 East Bonita Avenue
Pomona, California 91767

PHONE: 714/593-7521, ext. 275
YEARS OF OUTREACH FUNDING: 1

PROJECT STAFF: Elizabeth Mabon Neumann, Director; Linda Brekken, Coordinator; Occupational Therapists, Speech Therapist, Family Counselors, Teachers, Teaching Assistants, and Pediatrician

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Local school district for staff and supplies; hospital donations, etc. for space.

DESCRIPTION OF DEMONSTRATION MODEL:

Two therapeutic preschool classes serve children 1½ to 5 years with physical and neurological difficulties that interfere with their development. The TIPP model has four emphases: (1) focus on the child's strengths, (2) parent participation and parent advocacy training, (3) a dual approach to education, both prescriptive and child choice, and (4) a variation of "transdisciplinary team" with the teacher as "the pivotal transprofessional." Measurement instruments include a project-developed observational/curriculum-referenced scale, the Alpern-Boll, standardized measures such as the McCarthy, and other curriculum-referenced scales. The demonstration site is housed in a separate building on the hospital grounds.

MAJOR OUTREACH OBJECTIVES:

The project will conduct "first-level awareness" seminars for school districts statewide and encourage adoption/adaption by five to ten districts. Outreach objectives are to translate techniques for volunteers to use when tutoring in foster homes, and to train Volunteer Tutor Corps.

ACCOMPLISHMENTS DURING 1979:

Therapeutic Instruction Preschool Program (TIPP) and Outreach funding since July 1979 has enabled the project to disseminate much more effectively, without straining the resources and time of the teachers and staff working with the children.

Project materials include: (1) TIPP Competency Curriculum Manual (with BDDS scale); (2) Parent Advocacy Training Manual; (3) TIPP Slide-Tape; (4) PAT Slide-Tape.

- Number of people trained: 0
- Number of sites using model components: 10 local preschools, 40 Headstarts in two counties and 10 foster homes.

JDRP-APPROVED AS OF JANUARY 1, 1980: No

EARLY ON PROGRAM -- BEHAVIORAL ASSESSMENT AND EDUCATIONAL
PLANNING FOR MULTIHANDICAPPED CHILDREN

FISCAL AGENCY: San Diego State University Foundation

ADDRESS: 5300 Campanile Avenue PHONE: 714/265-6974
San Diego, California 92182 YEARS OF OUTREACH FUNDING: 6

PROJECT STAFF: Richard Brady, Director; Steven Savage, Coordinator
Program Specialist

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Replication sites are operated with local school district funds.

DESCRIPTION OF DEMONSTRATION MODEL:

The demonstration model uses a behavioral approach to home- and center-based programming. The basis of the model is performance-determined instruction, using a data-based instructional management system.

MAJOR OUTREACH OBJECTIVES:

- The project's outreach objectives are to:
- Develop exemplary procedures for delivering quality educational programs to young multihandicapped children and their families.
 - Increase the number of severely, profoundly, and multiply handicapped children receiving services through the Early On model.
 - Provide technical assistance, training and materials to agencies currently serving or preparing to serve handicapped children in home- and school-based programs.

ACCOMPLISHMENTS DURING 1979:

Technical assistance and training were provided to educational agencies in California, Head Start, public and private school programs, private institutions and community training homes. Special education students at the university received preservice training.

Available materials include a Diagnostic Teachers' Handbook, Parent Training Manual, Self-instruction Modules, and Early On Forms.

- Number of people trained: 100
- Number of sites using model components: 12

JDRP-APPROVED AS OF JANUARY 1, 1980: No

INCLASS REACTIVE LANGUAGE (INREAL) OUTREACH

FISCAL AGENCY: University of Colorado

ADDRESS: Dept. of CDSS
University of Colorado
Campus Box 121
Boulder, Colorado 80309

PHONE: 303/492-8727
YEARS OF OUTREACH FUNDING: 3

PROJECT STAFF: Rita S. Weiss, Director; Karen Hansen & Elizabeth Heublein,
Co-Coordiators

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
University of Colorado Department of Communication Disorders and Speech
Sciences, and fees

DESCRIPTION OF DEMONSTRATION MODEL:

INREAL is an innovative alternative treatment method and service delivery system for improving the language skills of preschool and kindergarten language-impaired children in their classrooms. A pre-post study was conducted over three years on 1,113 children in four different school districts in Colorado. Language change data showed the INREAL method resulted in significant language performance gains in the treatment groups.

MAJOR OUTREACH OBJECTIVES:

- The project has two major objectives:
- Inservice training of speech-language pathologists and early childhood personnel in INREAL methodology.
 - INREAL preservice training of undergraduate and graduate speech-language pathologists and early childhood personnel.

ACCOMPLISHMENTS DURING 1979:

INREAL/Outreach has been involved in a series of training and technical assistance activities including: inservice and preservice training, state implementation grant subcontract for nine school districts, presentation at the American Speech and Hearing Association convention, and student regional exchange programs.

The project has developed two videotapes: 15-minute Reactive Language therapy techniques and 30-minute INREAL Longitudinal Case Study. Print materials include INREAL brochures, Reactive Language therapy techniques, parent manual, and longitudinal and cost-effectiveness data.

- Number of people trained: 1,139
- Number of sites using model components: 54

JDRP-APPROVED AS OF JANUARY 1, 1980: No

OUTREACH ASSISTANCE FOR UTILIZATION OF THE
RUTLAND CENTER DEVELOPMENTAL THERAPY MODEL

FISCAL AGENCY: University of Georgia

ADDRESS: 125 Minor Street
Athens, Georgia 30606

PHONE: 404/542-6076
YEARS OF OUTREACH FUNDING: 6

PROJECT STAFF: Karen R. Davis, Director
Training Associates

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
State Department of Education

DESCRIPTION OF DEMONSTRATION MODEL:

This project focuses on stimulating increased, specialized, high-quality services to seriously emotionally disturbed and other handicapped preschool children (2 to 8) and their parents and teachers. Technical assistance is offered to selected target audiences and individuals to facilitate the utilization of the Rutland Center Developmental Therapy Model.

MAJOR OUTREACH OBJECTIVES:

The outreach project provides the following services to agencies and individuals who utilize the Developmental Therapy Model: Information dissemination; assistance in program planning and design; staff development, including identification and referral process, intake and diagnostics, developmental therapy curriculum, school liaison, parent services, and staff evaluation; assistance in establishing an effective evaluation system.

ACCOMPLISHMENTS DURING 1979:

The staff provided model utilization sites with training ranging from information and awareness sessions to site visits and in-depth instruction in developmental therapy. The total number of children served in treatment stimulated by the project's efforts was 758. As of July 1, 1979, for each dollar BEH-HCEEP invested in this outreach project a return of at least 12 program dollars was realized in the 20 model utilization sites.

- Number of people trained: 845
- Number of sites using model components: 34

JDRP-APPROVED AS OF JANUARY 1, 1980: Yes

PRECISE EARLY EDUCATION FOR CHILDREN WITH HANDICAPS
(PROJECT PEECH)

FISCAL AGENCY: Institute for Child Behavior and Development

ADDRESS: University of Illinois
Colonel Wolfe School
403 East Healey
Champaign, Illinois 61820

PHONE: 217/333-4890
YEARS OF OUTREACH FUNDING: 7

PROJECT STAFF: Merle B. Karnes, Director; Anna Marie Bergman, Coordinator; 2 Replication Specialists, Evaluator, Secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Joint agreement between Rural Champaign County Educational Cooperative and University of Illinois.

DESCRIPTION OF DEMONSTRATION MODEL:

PEECH is a center-based program for 3- to 5-year-old handicapped children and their families. Although the primary population is the mild to moderately handicapped, the procedures have been adapted for lower functioning sensory impaired children. In addition to pre- and posttest data which are obtained on all children, teachers assess each child's abilities, set individualized goals and objectives, teach, and continually evaluate child progress.

MAJOR OUTREACH OBJECTIVES:

The objectives of the project are to:

- Train site personnel in the procedures for developing, implementing, and demonstrating a model early education program for preschool handicapped children.
- To prepare and disseminate materials to assist early childhood personnel in the education of handicapped children.

ACCOMPLISHMENTS DURING 1979:

In addition to the intensive training which is provided to each year's replication sites, PEECH annually conducts an average of 45 component workshops on topics relevant to early childhood special education and an average of 15 awareness workshops. Over 8,000 materials are mailed to interested professionals throughout the U.S. People from every state and several foreign countries visit the demonstration site each year.

These materials are available: manuals on classroom planning and programming and family involvement, and numerous handouts describing components of the early childhood special education program.

- Number of people trained: 160
- Number of sites using model components: 33

JDRP-APPROVED AS OF JANUARY 1, 1980: Yes

RETRIEVAL AND ACCELERATION OF PROMISING
YOUNG HANDICAPPED AND TALENTED (RAPYHT)

FISCAL AGENCY: University of Illinois

ADDRESS: Colonel Wolfe School
403 E. Healey
Champaign, Illinois 61820

PHONE: 217/333-4891
YEARS OF OUTREACH FUNDING: 2

PROJECT STAFF: Merle B. Karnes, Director; Cynthia Denton, Coordinator
Outreach Specialist, Evaluator

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Joint agreement between Rural Champaign County Educational Cooperative and
University of Illinois.

DESCRIPTION OF DEMONSTRATION MODEL:

A specific set of procedures were developed for the identification, assessment, and programming for gifted/handicapped preschool children. These procedures were demonstrated as effective in two classrooms at the University of Illinois--an open or informal approach and the Structure of Intellect Model.

MAJOR OUTREACH OBJECTIVES:

Major objectives are to:

- Train selected special education personnel to identify and provide educational services for gifted handicapped.
- Facilitate awareness and disseminate materials in order to provide improved services for gifted/talented handicapped children.

ACCOMPLISHMENTS DURING 1979:

Technical assistance was effectively provided to three major target groups--state consultants, replication/demonstration sites, and awareness audiences. Teachers at replication sites screened 216 children for potential giftedness. Replication sites conducted 11 awareness activities by 239 individuals. The RPYHT staff conducted 19 workshops in 13 states which were attended by 733 individuals. The project disseminated 978 awareness materials.

These materials can be obtained from the project: Preschool Talent Checklist, Preschool Talent Checklist Manual, Preschool Talent Assessment Guide, Nurturing Talent in Early Childhood Series (in 8 talent areas).

- Number of people trained: 89
- Number of sites using model components: 7

JDRP-APPROVED AS OF JANUARY 1, 1980: No

MACOMB 0-3 REGIONAL PROJECT: A RURAL CHILD/PARENT SERVICE

FISCAL AGENCY: Western Illinois University

ADDRESS: 27 Horrabin Hall
Western Illinois University
Macomb, Illinois 61455PHONE: 309/298-1634
YEARS OF OUTREACH FUNDING: 2PROJECT STAFF: Patricia L. Hutinger, Director
2 Trainer/Replicators, Evaluator

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

McDonough County Rehabilitation Center and Fulton County Community Workshop and Training Center are funded by Division of Mental Health/Developmental Disabilities.

DESCRIPTION OF DEMONSTRATION MODEL:

The Macomb 0-3 Regional Project provides a home-based remediation/education service to handicapped children from birth to 3 years of age and their families. It is a rural infant delivery service model. The following components are provided: home visits, sharing centers (which incorporate child activities and parent study topics), and water activities. Parents are involved in all activities. The model project has demonstrated significant child gains based on core curriculum activities.

MAJOR OUTREACH OBJECTIVES:

The major objectives are two-fold: (1) to increase high quality specialized services in rural areas to handicapped and high-risk children from birth to six years of age, and to their parents; (2) to develop an effective outreach model for rural communities using selective components or the complete model. Meeting these objectives will result in an increase in the number of programs for infants and young children in rural areas, further development of materials and curricula for such projects, and a higher quality of intervention delivery strategies. Outreach activities include awareness, stimulation of replication sites, training of others, consultation, state involvement/ coordination, product development, refinement, and revision.

ACCOMPLISHMENTS DURING 1979:

Two full-scale replication sites were developed. In addition, one site adopted the WADE (Water Activities for Developmental Enhancement) component and four sites adopted the sharing center component. Workshops included CEC Institute on Infant Development, Normal Child Development-Public Health Nurses, Four Rivers Special Education District Workshop, Workshop on Handicapping Conditions for State of Illinois DCFS Handicapped Migrant Program Directors and Teachers, and Illinois Association for Rehabilitation Facilities Training Conference, and a university course.

The project has available 21 papers on topics related to the operation of an infant project. Four books and various slide-tapes and videotapes have been developed.

- Number of people trained: 19 (in model components)
- Number of sites using model components: 6

JDRP-APPROVED AS OF JANUARY 1, 1980: No

THE PEORIA 0-3 OUTREACH PROJECT

FISCAL AGENCY: United Cerebral Palsy & Peoria Association of Retarded Citizens

ADDRESS: 913 N. Western
Peoria, Illinois 61604

PHONE: 309/674-1808
YEARS OF OUTREACH FUNDING: 5

PROJECT STAFF: Debbie Putman, Director
Registered Physical Therapist, Speech/Language Pathologist, Materials Coordinator, Senior Staff Specialist

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Service fees, Department of Mental Health, United Fund, contributions.

DESCRIPTION OF DEMONSTRATION MODEL:

The medical/educational model is based on a developmental task analysis approach to individualized prescriptive teaching, delivered in the home by parents with assistance from professionals. The ongoing direct service program serves children (birth to 3) who are at risk, mentally retarded, and/or orthopedically handicapped. The service program includes a diagnostic and evaluation service, IEP planning, home-based programming (including occupational, physical, and speech therapy when appropriate) and parent support systems.

MAJOR OUTREACH OBJECTIVES:

- Training program objectives are to:
- Provide on-site technical assistance and/or individual workshops or other training sessions.
 - Consult on home visits and observe demonstration classes and other appropriate training methods.
 - Provide basic materials to sites for establishing and maintaining a birth to 3 program for handicapped children (manual, handouts, etc.).
 - Promote the overall development of cooperating sites' birth to 3 programs through any means available.
 - Respond to all reasonable requests to assist cooperating sites in becoming comprehensive service providers.

ACCOMPLISHMENTS DURING 1979:

Technical assistance is provided to 14 birth to 3 programs in five states. The project has: disseminated manuals explaining program format and components; provided training workshops for cooperating site personnel; presented to Allied Health personnel as to the availability of services for young handicapped children; conducted a course on infant programming at Western Illinois University; developed training materials, including two videotapes; provided technical assistance to the local demonstration model and agency personnel.

These materials are available: slide-tape presentations (including normal and abnormal motor development); handouts on parent education, motor, speech, and language development; program manual; and child progress assessment instrument (birth to 3).

- Number of people trained: 200
- Number of sites using model components: 110

JDRP-APPROVED AS OF JANUARY 1, 1980

Yes
160

PROJECT RHISE/OUTREACH

FISCAL AGENCY: Children's Development Center

ADDRESS: 650 N. Main Street
Rockford, Illinois 61103

PHONE: 815/965-6766
YEARS OF OUTREACH FUNDING: 3

PROJECT STAFF: Stephen Guedet, Director
2 Training Coordinators, Secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Illinois Department of Mental Health, United Way, fees, gifts and contributions.

DESCRIPTION OF DEMONSTRATION MODEL:

The Project RHISE service delivery model is adaptable to both home-based and center-based sites and utilizes the Consultancy Model for serving children. Parents are viewed as primary programmers for their child with a parent-to-parent approach being used for support. Additionally, a strong organizational framework and community relations activities round out a comprehensive program. Child progress is measured through formal standardized assessment by the clinical consultants and educational assessment by the parent-infant educator.

MAJOR OUTREACH OBJECTIVES:

Project RHISE/Outreach focuses on the development of comprehensive programs for handicapped infants (birth to 3 years) through the provision of long-term training and topical workshops. Dissemination of project materials, community awareness activities, and state-level involvement (e.g., state consortium) are also stressed.

ACCOMPLISHMENTS DURING 1979:

The project has provided training at other sites and through topical workshops. It also participated in a statewide birth-to-3 awareness conference with the state consortium, in addition to numerous presentations at regional, state, and national conferences. During 1979, a project-developed educational checklist was published.

Available materials include a curriculum syllabus, developmental checklist, parent needs assessment, parent learning packages, parent-developed slide-tape, and program description articles.

- Number of people trained: 227
- Number of sites using model components: 7

JDRP-APPROVED AS OF JANUARY 1, 1980: No

FACILITATIVE ENVIRONMENTS ENCOURAGING DEVELOPMENT (FEED)

FISCAL AGENCY: Institute for Child Study, Indiana University

ADDRESS: 10th Street & Bypass 46
Bloomington, Indiana 47405

PHONE: 812/337-1732
YEARS OF OUTREACH FUNDING: 3

PROJECT STAFF: Susan J. Eklund, Director
2 Field Coordinators, 2 Administrative Assistants, Research & Evaluation Coordinator

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Indiana University

DESCRIPTION OF DEMONSTRATION MODEL:

FEED is a seventh and eighth grade curriculum experience that focuses on assisting young people to learn, before they become parents, about child growth and the development of infants and preschoolers. The program includes both in-school and out-of-school practicum settings in which young people encounter direct experiences with normal and handicapped infants and preschoolers. Seven project-developed and two commercially-developed instruments have been used to measure student progress.

MAJOR OUTREACH OBJECTIVES:

The program was designed to teach young people that infants are much more competent at birth than most people believe, and that the quality of care provided during the first days and months of the infant's life do much to facilitate or hamper the child's development. The project rationale is that this experience will enable adolescents, when they become parents, to facilitate their child's development.

ACCOMPLISHMENTS DURING 1979:

During the current funding year, three new FEED sites were established. New sections were added to the FEED Implementation and Curriculum Guides and presentations were made at several major educational conferences.

Project-developed materials include the FEED Implementation Guide and FEED Curriculum Guide.

- Number of people trained: 25
- Number of sites using model components: 11

JDRP-APPROVED AS OF JANUARY 1, 1980: No

HOME LEARNING CENTER FOR PRESCHOOL HEARING IMPAIRED CHILDREN

FISCAL AGENCY: Ball State University

ADDRESS: Home Learning Center
Ball State University
Muncie, Indiana 47306PHONE: 317/285-4940
YEARS OF OUTREACH FUNDING: 2PROJECT STAFF: Emily Wallace, Director; Idona Compliment, Coordinator
Parent Advisor, Pediatric AudiologistSOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Ball State University

DESCRIPTION OF DEMONSTRATION MODEL:

The project operates a home- and center-based program for the early education of hearing impaired children, birth to 5, and their parents. A demonstration class serves children ages 3 to 5. Hearing impaired children are integrated with their hearing peers in nursery school. Prospective teachers of the hearing impaired may receive demonstration and training services from the project.

MAJOR OUTREACH OBJECTIVES:

Major objectives of the project are to:

- Provide inservice workshops entitled "The Young Language Handicapped Child" for public school and other nonprofit agency personnel.
- Provide consultation services for public school and other nonprofit agency personnel.
- Develop media (printed and videotaped) for inservice training.
- Train personnel at replication sites.

ACCOMPLISHMENTS DURING 1979:

The project conducted mass mailings to all practicing physicians, all Directors of Special Education, and all agencies serving handicapped children in Indiana. Eighteen inservice workshops were held for approximately 826 people.

The project has these materials available: (1) an Inservice Training Manual covering areas of language acquisition, parent involvement, audiological management, and mainstreaming; (2) resource packet for teachers of mainstreamed children; and (3) six videotapes on speech, language, and mainstreaming.

- Number of people trained: 826
- Number of sites using model components: 18

JDRP-APPROVED AS OF JANUARY 1, 1980: No

LOUISIANA OUTREACH PROJECT FOR PRESCHOOL HANDICAPPED CHILDREN

FISCAL AGENCY: Lincoln Parish Schools

ADDRESS: Lincoln Center
Arlington Street
Ruston, Louisiana 71270

PHONE: 318/255-6071
YEARS OF OUTREACH FUNDING: 3

PROJECT STAFF: Gertrude Simonton, Director
4 Classroom Teachers, 4 Teacher Aides, Teacher Trainer, Secretary, Speech
Therapist, Psychologist, 2 Adaptive Physical Education Teachers, Art Teacher

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
SEA--73 percent, LEA--27 percent.

DESCRIPTION OF DEMONSTRATION MODEL:

This project focuses on service delivery for handicapped children ages 3 to 5 years and their families. The center-based public school model serves children from four rural local education agencies, and receives funding from both LEA and SEA sources. Project-developed curriculum and assessment measures are used.

MAJOR OUTREACH OBJECTIVES:

The project's outreach effort is conducted through the seven State Planning Districts which are administrative units in Louisiana. An adopter site in each district is trained in the use of demonstration model components. The adopter is then trained to provide an outreach service to other adopters in the district. Technical assistance is also provided upon request to other sites who are implementing preschool handicapped programs and to university classes and public agencies who are involved with preschool handicapped children.

ACCOMPLISHMENTS DURING 1979:

The demonstration project has continued to operate as a model site for the state of Louisiana. Replication services have continued for the seven adopter sites, and project information and materials have been disseminated nationwide. In response to SEA request, technical assistance efforts are directed at seven additional LEAs during the 1979-80 school year.

A 120-page curriculum guide includes sequential, behaviorally stated objectives, activities and parent education materials. Other products, 10 to 20 pages each, are Positive Parenting, Potty Training Pamphlet, Tips for Better Speech, and Dressing and Grooming Tips.

- Number of people trained: 188
- Number of sites using model components: 9

JDRP-APPROVED AS OF JANUARY 1, 1980: No

PROJECT MAINE STREAM OUTREACH PROGRAM

FISCAL AGENCY: Maine School Administrative District #51

ADDRESS: P.O. Box 25
Cumberland, Maine 04021

PHONE: 207/829-5541
YEARS OF OUTREACH FUNDING: 5

PROJECT STAFF: Barbara Berkovich, Director/Coordinator
Early Childhood Specialist, Librarian, Dissemination & Resource Coordinator,
Secretary, Bookkeeper, Consultants (Speech/Language Therapist, Occupational
Therapist, Media Specialist)

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Maine School Administrative District #51

DESCRIPTION OF DEMONSTRATION MODEL:

The Project Maine Stream Outreach demonstration model is based on the philosophy that critical therapeutic early intervention allows handicapped children to enter the educational mainstream. The model is based on developmental theory with strong components for promoting early language and sensorimotor development.

MAJOR OUTREACH OBJECTIVES:

Major objectives of the project are to:

- Provide technical assistance and demonstration site activities to facilitate replication of the Maine Stream model.
- Provide assistance to preschools and kindergartens in serving handicapped children who were previously excluded or inappropriately served.
- Provide inservice training and resources to both personnel in integrated or special programs and to Maine Medical Center Pediatric residents.
- Develop products which support replication, demonstration and training activities which meet the needs of early intervention personnel in Maine.

ACCOMPLISHMENTS DURING 1979:

Agencies that are replicating components of the Maine Stream model have received consultation for program development and administration, preservice and inservice training, resources and materials, and/or program resource materials and liaison activities. Workshops are conducted on a variety of early intervention topics, including: screening-assessment-diagnosis, child development, curriculum strategies, family involvement, and educational resources.

The project has these materials available: (1) 10 books on language and motor development, preschool screening, handicapping conditions, prescriptive toymaking, bibliography, behavior management and media productions; (2) five slide-tapes on language and motor development, prescriptive toymaking, screening; (3) training materials; and (4) a newsletter.

- Number of people trained: 2,208
- Number of sites using model components: 46

JDRP-APPROVED AS OF JANUARY 1, 1980: No

BALTIMORE EARLY CHILDHOOD LEARNING CONTINUUM

FISCAL AGENCY: Baltimore City Public Schools

ADDRESS: 2300 N. Calvert Street PHONE: 301/396-6997
Div. for Exceptional Children YEARS OF OUTREACH FUNDING: 3
Baltimore City Public Schools
Baltimore, Maryland 21218

PROJECT STAFF: Jane Birckhead, Director
Educational Specialist, 2 Outreach Disseminators, Media Specialist, Educational Assistant

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Baltimore City Public Schools

DESCRIPTION OF DEMONSTRATION MODEL:

The Baltimore Early Childhood Learning Continuum is a systems approach to mainstreaming handicapped children, providing early identification and special education services for the moderately handicapped preschool child. Diagnostic and prescriptive services, including tutoring and resource or small group assistance are provided. The mainstream teacher receives inservice and supportive services from a continuum team.

MAJOR OUTREACH OBJECTIVES:

- The project's major objectives are to:
- Screen kindergarten and first grade children in target schools.
 - Analyze needs and resources of individual schools to help facilitate the provision of services to handicapped children.
 - Develop a school screening mechanism for children to receive specialized help within the general classroom.
 - Assist schools in the provision of services to handicapped children in compliance with the provisions of P.L. 94-142.

ACCOMPLISHMENTS DURING 1979:

Project activities included (1) dissemination of project information, (2) screening and identification, (3) staff participation in media activities, (4) continuation of demonstration sites, and (5) direct consultation to early childhood teachers to facilitate intervention for handicapped children.

Types of project-developed materials available include: (1) Baltimore Early Identification Screening Instrument; (2) Teacher Training Modules (Teachers are Behaviorists, Preparing for Assessment, Methods of Assessment, Prompts, Positive Reinforcement, Punishment, and Cues).

- Number of people trained: 200
- Number of sites using model components: 10

JDRP-APPROVED AS OF JANUARY 1, 1980: No

ERIN OUTREACH PROGRAM

FISCAL AGENCY: Early Intervention/Recognition Network

ADDRESS: 376 Bridge Street PHONE: 617/329-5529
Dedham, Massachusetts 02026 YEARS OF OUTREACH FUNDING: 2

PROJECT STAFF: Marian L. Hainsworth, Director
Evaluation/Dissemination Specialist, Training/Support Specialist, 2 Training/
Support Assistants, Field Staff Assistant, Secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Local public school

DESCRIPTION OF DEMONSTRATION MODEL:

The ERIN System is implemented in both special and regular educational settings. The specialized combination preschool classroom/home programs serve children (2 to 7) with moderate to severe special needs and their parents. The regular early childhood and primary (K-1) program serves mildly to moderately handicapped children who are integrated with their normal peers. The ERIN Training Program for Adults (for special or regular teachers, coordinators, and parents) provides the equivalent of three to six college credits through a week-long institute plus on-site consultation by ERIN staff.

MAJOR OUTREACH OBJECTIVES:

Major objectives of ERIN are to:

- Increase the number of children served and improve the quality of programs using the ERIN model.
- Assist 19 outreach sites in six states in developing quality demonstrations of the ERIN model.
- Provide extended outreach through these sites to other groups in their states and regions.
- Disseminate ERIN print and audiovisual materials.
- Provide summer training programs.

ACCOMPLISHMENTS DURING 1979:

The ERIN Project conducted a 5-day ERIN Leadership Training Institute for trainers and coordinators in 17 mainstream sites, a Specialized Implementor's Conference, and four Regional Mainstream Workshops. It provided additional training and support to trainers and implementors via Special Topic Central Workshops. Four to six on-site visits were made to each replication program. ERIN is developing 16 printed modules and disseminating awareness materials.

Project-developed materials include: (1) resource books on language, visual, perceptual, motor, and body awareness and control; (2) preschool screening system; (3) First Steps: Guidebook One--Increasing Family Participation; (4) modules on environment, screening, planning, and teaching with assorted support slide-tapes and materials; (5) awareness materials. A complete list is available from ERIN.

- Number of people trained: 150
- Number of sites using model components: 19

JDRP-APPROVED AS OF JANUARY 1, 1980: Yes

LEARNING IN INTEGRATED CLASSROOMS (LINC)--OUTREACH

FISCAL AGENCY: Tufts University

ADDRESS: Tufts University
28 Sawyer Avenue
Medford, Massachusetts 02155

PHONE: 617/628-5000, ext. 6116
YEARS OF OUTREACH FUNDING: 3

PROJECT STAFF: Samuel J. Meisels & Lane W. Gunnoe, Co-Directors
3 Staff Development Specialists, Secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Tufts University

DESCRIPTION OF DEMONSTRATION MODEL:

The demonstration model is developmental in nature. The model emphasizes individualized instruction within the mainstreamed classroom.

MAJOR OUTREACH OBJECTIVES:

LINC's training objectives are to:

- Increase and improve appropriate educational opportunities for young mildly and moderately handicapped children and their families.
- Increase general awareness concerning the need for early intervention and the potential benefits of mainstreamed programs.
- Provide training to early childhood teachers and potential trainers of early childhood teachers concerning the skills and knowledge required to implement a successful mainstreamed classroom program.
- Assist in the development of interagency cooperation so that an effective, coordinated continuum of services to young handicapped children and their families becomes a reality.

ACCOMPLISHMENTS DURING 1979:

LINC Outreach has collaborated with state (SEA, STC) and local (LEA, Head Start) early childhood educators in providing inservice training on mainstreaming to early childhood teachers and trainers of teachers. The project has disseminated its model through print and audiovisual materials, as well as through attendance at many professional conferences.

Project-developed materials include three professionally-produced slide-tape presentations on mainstreaming, a comprehensive teacher-training manual, and a variety of other written materials concerning mainstreaming and early childhood intervention. A trainer's guide to the manual and materials for teachers of first- and second-grade children will be completed in the spring of 1980.

- Number of people trained: 280
- Number of sites using model components: 24

JDRP-APPROVED AS OF JANUARY 1, 1980: No

PROJECT OPTIMUS/OUTREACH

FISCAL AGENCY: South Shore Mental Health Center

ADDRESS: 77 Parkingway PHONE: 617/471-0350
Quincy, Massachusetts 02169 YEARS OF OUTREACH FUNDING: 3

PROJECT STAFF: Geneva Woodruff, Director
Therapeutic Coordinator, Parent Coordinator, Education Coordinator, Administrative Assistant

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

United Way of Massachusetts, third-party payments, Title XX funds, and endowment fund

DESCRIPTION OF DEMONSTRATION MODEL:

Project First, the demonstration component, is a center- and home-based program for handicapped children (under age 3) and their families. Project First employs a modified transdisciplinary approach, using a primary provider for direct services, but employing a team to assess, plan, and evaluate. Child progress is measured every three months using developmental assessment and observation by therapeutic and educational staff.

MAJOR OUTREACH OBJECTIVES:

The project trains New England-based program administrators and personnel who serve developmentally delayed children (birth to 5) and their families. The purpose of the program is to provide quality services to handicapped children, particularly those with moderate to severe disabilities.

ACCOMPLISHMENTS DURING 1979:

Workshops, replication and technical assistance, and materials development comprised the major portion of the project's training efforts.

Project-developed materials include: (1) Parent Involvement Manual, (2) slide-tape on the transdisciplinary service delivery model, (3) slide-tape on parental involvement in the transdisciplinary team.

- Number of people trained: 250
- Number of sites using model components: 14

JDRP-APPROVED AS OF JANUARY 1, 1980: No

TELSTAR

FISCAL AGENCY: Alpena-Montmorency-Alcona Intermediate School District

ADDRESS: 1691 M 32, West
Alpena, Michigan 49707

PHONE: 517/354-3101
YEARS OF OUTREACH FUNDING: 3

PROJECT STAFF: Vicki Wozniak, Director; Thomas G. Miller, Coordinator
Outreach Worker, Secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Alpena-Montmorency-Alcona Intermediate School District

DESCRIPTION OF DEMONSTRATION MODEL:

Telstar is a developmentally-based home intervention model which offers support to parents--the primary teachers of children. Children birth to 5 and handicapped under P.L. 94-142 or PA 198 of Michigan, and their parents, are eligible to receive services. Every six to nine weeks, parents and staff determine child goals in five developmental areas. Both educational and ancillary services are provided within the home.

MAJOR OUTREACH OBJECTIVES:

Telstar's major objectives are to:

- Develop products which will facilitate replication of the program model.
- Stimulate the growth of high-quality preschool programs by working with LEAs and other agencies.
- Provide opportunities for replication of the Telstar model.
- Provide staff training on a variety of topics dealing with services to preschool handicapped youngsters.

ACCOMPLISHMENTS DURING 1979:

Telstar is validated through the state of Michigan and is classified by the Title IV-C committee as a demonstration model program. Therefore, the project has adoption monies available to other districts that wish to implement the program.

Available materials include: (1) Developmental Checklist and Manual (a curriculum based on developmental milestones), (2) Parent Program Manual (a resource book of ideas), and (3) Home Visitors Training Manual (a staff training guide).

- Number of people trained: 75
- Number of sites using model components: 12

JDRP-APPROVED AS OF JANUARY 1, 1980: No

HIGH/SCOPE FIRST CHANCE OUTREACH PROJECT

FISCAL AGENCY: High/Scope Educational Research Foundation

ADDRESS: 600 North River Street
Ypsilanti, Michigan 48197

PHONE: 313/485-2000
YEARS OF OUTREACH FUNDING: 3

PROJECT STAFF: Michael L. Hanes, Director/Coordinator
Program Specialists/Consultants

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
High/Scope Educational Research Foundation

DESCRIPTION OF DEMONSTRATION MODEL:

The Cognitively-Oriented Preschool Curriculum is an open framework model derived from Piagetian developmental therapy. Through designated key experiences for children, teaching and parenting strategies, and child observation materials, the curriculum model provides a decision-making framework. Within this framework, teachers develop a classroom program which reflects their expressed needs and the interests of the children. This developmental approach emphasizes the identification of the child's status on a developmental continuum by examining the child's strengths or developmental accomplishments.

MAJOR OUTREACH OBJECTIVES:

The project's major objectives are to:

- Provide technical assistance and training to selected replication/demonstration sites.
- Provide introductory/awareness workshops about the Cognitively-Oriented Curriculum and mainstreaming preschool handicapped children.
- Provide technical assistance in the areas of needs assessment and program planning to potential replication sites.

ACCOMPLISHMENTS DURING 1979:

The High/Scope project staff have provided approximately 40 days of on-site technical assistance to 20 potential replication sites and approximately 65 days of training at seven replication and demonstration centers. Over 600 visitors have observed in the demonstration classroom in Ypsilanti and have received a 2-hour orientation to the curriculum and dissemination models.

A curriculum manual and training materials are available from the program.

- Number of people trained: 600
- Number of sites using model components: 10

JDRP-APPROVED AS OF JANUARY 1, 1980: Yes

EARLY EDUCATION-OUTREACH

FISCAL AGENCY: St. Paul Public Schools #625

ADDRESS: 1930 Como Avenue
St. Paul, Minnesota 55108

PHONE: 612/644-2001
YEARS OF OUTREACH FUNDING: 4

PROJECT STAFF: Virginia M. Bunker, Director
Media Consultant, Occupational Therapist Consultant, Speech/Language Consultant, Classroom Teacher Consultant, Administrative Assistant, Parent Program Consultant, Media Assistant, Secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Funded as a public school special education program by Minnesota State and local reimbursement formulas.

DESCRIPTION OF DEMONSTRATION MODEL:

The demonstration model is a cognitively-oriented, family-centered intervention and remediation program for children (birth through 5 years) who are significantly developmentally delayed. The program includes a full range of services, with frequent combinations of center- and home-based teaching to foster parents as teachers in both settings. The program uses the criterion-referenced Vulpe' Assessment Battery and is field testing its curriculum.

MAJOR OUTREACH OBJECTIVES:

The project has these as major objectives:

- Information dissemination and technical assistance to target agencies throughout Minnesota, committed to the initiation and/or expansion of public school services to preschool handicapped children and their families.
- Nine major technical assistance components are: casefinding/screening, pre-program and in-program assessment, field testing of the St. Paul Early Education Program (SPEEP) Curriculum, program evaluation, staff training, resource library, parent involvement, specialized consultation, and fiscal management.

ACCOMPLISHMENTS DURING 1979:

The project has developed a resource lending library for staff and parents. It has provided program evaluation consultation and distributed a statewide early childhood special education newsletter.

Project-developed materials include a manual of philosophy and objectives for parent involvement (Reach Out: How Teachers Involve Parents in Preschool Programs for Children with Special Needs), a 25-minute training videotape and manual for stimulating speech and language development of preschool handicapped children, and an "awareness" slide-tape program (The Role of the Occupational Therapist in a Preschool Setting).

- Number of people trained: 585
- Number of sites using model components: St. Paul Outreach provides its services throughout Minnesota in an interagency agreement with the Minnesota Preschool Regional Consultants who are funded through the Minnesota Preschool Incentive Grant.

JDRP-APPROVED AS OF JANUARY 1, 1980: No

EARLY EDUCATION CENTER OUTREACH PROJECT

FISCAL AGENCY: Early Education Center, Christian Educational Services, Inc.

ADDRESS: P.O. Box 10356
Westland Station
Jackson, Mississippi 39209

PHONE: 601/353-1664
YEARS OF OUTREACH FUNDING: 2

PROJECT STAFF: Stephen J. Robertson; Director; Ann Henson, Coordinator
2 Trainers, Secretary/Bookkeeper

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
State Department of Public Welfare Title XX, State Department of Mental Health, Developmental Disabilities, state appropriations, community donations.

DESCRIPTION OF DEMONSTRATION MODEL:

The model program provides developmental training for young handicapped children birth through 5 years. Programs are designed to meet each child's individual needs by utilizing the expertise of a multidisciplinary team. Staff use the "clipboard system" to systematically record child progress. This system provides orderly presentation of records for the purpose of evaluating performance data in the areas of gross and fine motor, social, language, self-help, cognitive and behavioral skills.

MAJOR OUTREACH OBJECTIVES:

- Major efforts are to:
- Stimulate replication/adaptation of the model.
 - Provide technical assistance and training.
 - Conduct workshops/seminars on relevant topics as determined by needs assessment for professionals and paraprofessionals working with young handicapped children.
 - Disseminate information and materials including those intended to increase public awareness.

ACCOMPLISHMENTS DURING 1979:

The Early Education Center Outreach Project has developed, implemented, and is presently evaluating the following modules: programming for individual needs, the EEC Clipboard System, augmentative communication, therapeutic feeding, children's developmental disabilities, programming from assessment instruments, and the EEC Model. A total of 40 agencies/groups have received training. The Outreach Project has sponsored or participated in five major workshops presented statewide. It also contributed to the development of the MESH Resource Directory.

These materials are available: (1) Outreach Training Modules (pre/posttests, curriculum, handouts, overheads, videotapes, and/or slide presentations for the areas mentioned above); (2) MESH Resource Directory (comprehensive listing of agencies serving young handicapped children in the state of Mississippi); and (3) Feeding/Language Assessment (checklist of feeding patterns and pre-language skills).

- Number of people trained: 1,195
- Number of sites using model components: 5

JDRP-APPROVED AS OF JANUARY 1, 1980: No

PROJECT RUN/OUTREACH

FISCAL AGENCY: North Mississippi Retardation Center

ADDRESS: P.O. Box 967 PHONE: 601/234-1476, ext. 219
Oxford, Mississippi 38655 YEARS OF OUTREACH FUNDING: 1

PROJECT STAFF: Genora S. Holloway, Director; Albert R. Hendrix, Coordinator; Training Specialist, Secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
North Mississippi Retardation Center

DESCRIPTION OF DEMONSTRATION MODEL:

The program offers a diagnostic/therapeutic treatment program for residential and community children from birth to 8 years who are diagnosed as severely/profoundly multiply handicapped. The model utilizes the Project RUN Early Education Assessment/Curriculum for planning and implementing each child's program in the areas of auditory discrimination, visual/ fine motor, communication, and gross motor. The children are taught on an individual basis using behavior modification principles. The program also offers a parent involvement and training program.

MAJOR OUTREACH OBJECTIVES:

Outreach objectives are to:

- Stimulate sites by providing workshops and technical assistance to direct service agencies participating in utilization/replication of the model.
- Train professionals and paraprofessionals in techniques for working with multiply handicapped children.
- Disseminate materials developed by Project RUN.
- Increase awareness of the need for quality services for multiply handicapped children.

ACCOMPLISHMENTS DURING 1979:

Project RUN/Outreach has been involved in onsite training, dissemination of materials, workshop presentations and collaboration with public schools. It is a member of a statewide BEH consortium.

The project has available an assessment/curriculum for severely/ profoundly multiply handicapped, parent involvement activities and a bibliography of resources for serving the handicapped.

- Number of people trained: 15
- Number of sites using model components: 5

JDRP-APPROVED AS OF JANUARY 1, 1980: No

PARENT-INFANT EARLY EDUCATION PROGRAM

FISCAL AGENCY: Central Institute for the Deaf

ADDRESS: 818 South Euclid
St. Louis, Missouri 63110

PHONE: 314/652-3200
YEARS OF OUTREACH FUNDING: 8

PROJECT STAFF: Audrey Simmons-Martin, Director; Patricia A. Gilliam, Co-ordinator

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Central Institute for the Deaf

DESCRIPTION OF DEMONSTRATION MODEL:

The model is designed for families and their children under 4 years of age who are diagnosed or strongly suspected to have educationally significant hearing impairments. Weekly sessions in a Home Demonstration Center are supplemented by nursery classes for children over 2 years and group meetings for parents. Regular audiometric evaluations are conducted by CID audiologists.

MAJOR OUTREACH OBJECTIVES:

- The project's major outreach objectives are to:
- Stimulate awareness through presentations and dissemination of materials.
 - Develop media to describe the process of the model more concretely.
 - Stimulate high quality programs nationwide and within Missouri.
 - Train replicating personnel and offer follow-up technical assistance.

ACCOMPLISHMENTS DURING 1979:

The project staff have been actively involved in awareness activities, product development, stimulation of high quality programs, and training of replicating personnel. Increasing emphasis has been placed on careful evaluation of each stage of the replication process.

Videotapes and slide-tape productions are available from the project. Print materials include Chats with Johnny's Parents (booklet with curriculum suggestions for parents), and Parent-Infant Intervention (Eds., Simmons-Martin & Calvert).

- Number of people trained: 19
- Number of sites using model components: 30+

JDRP-APPROVED AS OF JANUARY 1, 1980: Yes

CHAPEL HILL TRAINING OUTREACH PROJECT

FISCAL AGENCY: Chapel Hill, Carrboro Public Schools

ADDRESS: Lincoln Center
Merritt Mill Road
Chapel Hill, North Carolina 27514

PHONE: 919/967-8295
YEARS OF OUTREACH FUNDING: 8

PROJECT STAFF: Anne R. Sanford, Director; M. Elayne Glover, Coordinator
Family Involvement Coordinator, Administrative Secretary, Evaluation Consultant

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
State Incentive Grants from North Carolina and Kentucky; Administration for Children, Youth, and Families; Title I; Mental Health

DESCRIPTION OF DEMONSTRATION MODEL:

Individual learning objectives are established for children through use of the LAP and parental needs assessment. The Chapel Hill model is used in a variety of service delivery systems: center-based, home-based, resource room, and mainstream settings. Teacher training in task analysis, behavior modification, and parent involvement are basic model components, in addition to the assessment-curriculum design.

MAJOR OUTREACH OBJECTIVES:

The major outreach objective is to stimulate the replication of the Chapel Hill model in new programs for young handicapped children and their families through incentive grants by North Carolina and Kentucky SEA funding.

ACCOMPLISHMENTS DURING 1979:

The Kentucky State Department of Education has applied all of its incentive grant funds to the replication of the Chapel Hill model in 153 counties. The Chapel Hill-Carrboro Schools have established a model replication site for 3- to 5-year-olds.

The Chapel Hill Training Outreach Project provides a large number of project-developed training and awareness materials. Slide-tape programs, public service announcements, manuals, and a variety of print materials are available which cover topics such as assessment, curriculum, family involvement, P.L. 94-142, and competency-based training. A comprehensive listing of materials is available from the project.

- Number of people trained: 528
- Number of sites using model components: 513

JDRP-APPROVED AS OF JANUARY 1, 1980: No

ACCESS TO MAINSTREAM OUTREACH TRAINING PROJECT

FISCAL AGENCY: Alliance for Progress, Inc.

ADDRESS: Route 1, Box 335 PHONE: 919/356-4198
Colerain, North Carolina 27924 YEARS OF OUTREACH FUNDING: 3

PROJECT STAFF: Constance E. Holt, Director
Special Education Coordinator, Family Services Coordinator, Secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Early Childhood Intervention (Mental Health and Mental Retardation, Albemarle Community Mental Health Center) and the Home-Based Early Education Project of Gates County School.

DESCRIPTION OF DEMONSTRATION MODEL:

Access to Mainstream provides direct services to parents and their handicapped children (birth to 3) in their homes. A 6-county area is served.

MAJOR OUTREACH OBJECTIVES:

The purpose of this project is to train program personnel within the state of North Carolina to work with handicapped children in home-based settings. This includes initial start-up, implementation, and evaluation.

ACCOMPLISHMENTS DURING 1979:

The Access Outreach staff has provided training to teachers of handicapped children. Consultation, observation, and support services have also been provided across the state.

Project staff have developed six practical training manuals to use with teachers, parents, and/or teacher aides. A film, With a Little Help from My Friends: Access to Mainstream, has been produced, as well as a manual entitled Testing: Do Not Disturb.

- Number of people trained: 381
- Number of sites using model components: 5

JDRP-APPROVED AS OF JANUARY 1, 1980: No

KENT STATE UNIVERSITY--FIRST CHANCE
EDUCATION OF PROFOUNDLY HANDICAPPED YOUNG CHILDREN

FISCAL AGENCY: Kent State University

ADDRESS: 252 Lowry Hall
Kent, Ohio 44242

PHONE: 216/672-7970
YEARS OF OUTREACH FUNDING: 6

PROJECT STAFF: Jeanette Reuter, Director; Virginia Dunn, Assistant Director
Office Manager, Psychology Graduate Assistant

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Kent State University

DESCRIPTION OF DEMONSTRATION MODEL:

The project has developed a responsive environment model for the habilitation and education of severely and profoundly handicapped young children. The model consists of professional and caregiver assessment, programming, caretaking, physical environment, and evaluation components.

MAJOR OUTREACH OBJECTIVES:

Major objectives are to:

- Train professionals and paraprofessionals to assess, prescribe, and evaluate programs for severely/profoundly handicapped young children.
- Provide consultation and coordination services for responsive environment designs involving both physical and human aspects.

ACCOMPLISHMENTS DURING 1979:

The project has conducted workshops, classes, and consultations; presented papers at conferences; published in professional journals; and given interviews to newspapers on all objectives and components of the responsive environment model.

Available project materials include: (1) KID Scale Packet, (2) Bayley tape and answer sheets, (3) PATCH Manual and Training, (4) Social Milieu Observation Procedures.

- Number of people trained: 300
- Number of sites using model components: 28

JDRP-APPROVED AS OF JANUARY 1, 1980: No

PROJECT SHAPE (AN INSERVICE TRAINING MODEL)

FISCAL AGENCY: Beaverton School District #48

ADDRESS: P.O. Box 200
Beaverton, Oregon 97075

PHONE: 503/649-0450
YEARS OF OUTREACH FUNDING: 1

PROJECT STAFF: Doris Rosen, Director; Hank DeVoss, Coordinator
Physical Therapist, Speech Clinician, Teacher/Trainer, Manager

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
State Division of Mental Health--Title I

DESCRIPTION OF DEMONSTRATION MODEL:

This inservice training model is designed to facilitate the educational management of young profoundly handicapped children.

MAJOR OUTREACH OBJECTIVES:

This project employs specific instructional strategies based on a broad range of professional expertise. The training package is designed specifically for teachers and paraprofessionals who serve profoundly handicapped in TMR classrooms. Goals for outreach activities are primarily based on investigating the power of the model in terms of transferability. This would include the ability of trainees to demonstrate the multidisciplinary strategies, as well as to install the curricular components within the confines of a typical MR/DD preschool or TMR environment. Other project objectives are based on the continued validation of the curriculum with a population of children based in the replication classrooms.

ACCOMPLISHMENTS DURING 1979:

Inservice training sessions have been conducted at the demonstration classroom located in Beaverton (Ridgewood Elementary School). Sessions were also conducted in satellite classrooms. A pilot sample of parents was enrolled in the training to determine efficacy of the model with this population.

Project materials include a sensorimotor curriculum and a teacher training guide.

- Number of people trained: 10
- Number of sites using model components: 5

JDRP-APPROVED AS OF JANUARY 1, 1980: No

TEACHING RESEARCH DATA-BASED CLASSROOM MODEL

FISCAL AGENCY: Teaching Research Division of the Oregon State System of
Higher Education

ADDRESS: Todd Hall
 Monmouth, Oregon 97361

PHONE: 503/838-1220, ext. 401
YEARS OF OUTREACH FUNDING: 4

PROJECT STAFF: Torry Piazza Templeman, Director; H. D. (Bud) Fredericks,
Associate Director; 2 Instructor/Trainers

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Local Education Agency

DESCRIPTION OF DEMONSTRATION MODEL:

The Data-Based Classroom Model stresses individually prescribed instructional programs. Programming occurs in both group and individual settings; however, with the moderately and severely handicapped, individual instruction is emphasized. The model utilizes a task analyzed curriculum and trial-by-trial data collection designed for use by the classroom teacher. The model encourages the use of volunteers and demonstrates techniques for training them to interact and teach children on a one-to-one basis. Parents are an integral part of the model and assist in the teaching of their child. The model provides a comprehensive classroom management system. Coordination of instructional programs and analysis of daily data are emphasized. However, in the course of learning the model, a teacher develops a management system which allows him/her to coordinate all of the components of the classroom.

MAJOR OUTREACH OBJECTIVES:

The major outreach objective is replication of the Data-Based Classroom Model. This is most effectively accomplished by a one-week training session at Teaching Research and two follow-up technical assistance visits. Awareness workshops are also available.

ACCOMPLISHMENTS DURING 1979:

Numerous awareness presentations were made at the state, regional and national level. Thirty one-week intensive training sessions aimed at developing competencies for model replication were conducted. Five satellite training centers were in operation, conducting similar one-week inservice training sessions for 90 trainees. The purpose of a satellite center is to make training available regionally, while operating under stringent requirements to control quality.

The project can provide a listing of its available materials. They include (1) A Data-Based Classroom, describing the Teaching Research curriculum, (2) A Training Program for Parents of Retarded Children, (3) Toilet Training the Handicapped Child, (4) Group Home for Developmentally Disabled Children, (5) Initial Expressive Language Program, and (6) The Teaching Research Curriculum for Moderately and Severely Handicapped.

- Number of people trained: 55
- Number of sites using model components: 55

JDRP-APPROVED AS OF JANUARY 1, 1980: Yes

DIAGNOSTIC-PRESCRIPTIVE PRESCHOOL FOR HANDICAPPED CHILDREN

FISCAL AGENCY: Good Samaritan Hospital & Medical Center

ADDRESS: 2222 N.W. Lovejoy, Suite 361 PHONE: 503/229-7220
Portland, Oregon 97210 YEARS OF OUTREACH FUNDING: 1

PROJECT STAFF: David N. Grove, Director; Susan Merz Cook, Coordinator

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Portland Public Schools E.S.D. and Good Samaritan Hospital & Medical Center

DESCRIPTION OF DEMONSTRATION MODEL:

The program consists of two components: (1) educational-medical direct services, and (2) comprehensive diagnostic and evaluation services. The educational component is designed for neurologically or multiply handicapped infants and children. The model is predicated on criterion-referenced assessment, task analyzed curriculum, and individualized programming and instruction. The center is a training site for personnel from other agencies. The diagnostic component uses a transdisciplinary team to perform complete diagnostic work-ups on children from birth to 12 years of age. The Clinic also provides training to families of children attending the clinic programs and those with learning and/or behavior problems.

MAJOR OUTREACH OBJECTIVES:

- The project's major objectives are to:
- Increase the awareness of the need for early childhood education for the handicapped.
 - Revise the Diagnostic Prescriptive Training Manual and Curriculum Guide.
 - Replicate major program components in one community medical center outside the state of Oregon, and replicate the Diagnostic Prescriptive Preschool Model in two public school districts within Oregon.
 - Continue working with Teaching Research Division (Exceptional Child Research Program) to expand a statewide consortium.
 - Assist in development of countywide coordinated referral network.
 - Continue training in the Diagnostic Prescriptive Model for classroom teachers and other educational/medical personnel.
 - Provide technical assistance and consultation to educational/medical agencies serving handicapped children.

ACCOMPLISHMENTS DURING 1979:

Project staff made presentations at 14 local, state, and national conferences. Thirteen college students received practicum experience at the site. The project served 294 children, consulted with 182 public school teachers, and hosted 65 visitors to the demonstration preschool. In addition, outreach and technical assistance materials were produced and disseminated.

These materials are available from the project: parent training videotapes, observational checklist for monitoring child-adult interactions, and staff evaluation information.

- Number of people trained: 12
- Number of sites using model components: 5

JDRP-APPROVED AS OF JANUARY 1, 1980: No

FAMILY CENTERED RESOURCE PROJECT (FCRP)--OUTREACH

FISCAL AGENCY: Pennsylvania Department of Education, Bureau of Special and Compensatory Education

ADDRESS: 2900 St. Lawrence Avenue PHONE: 215/779-7111
Reading, Pennsylvania 19606 YEARS OF OUTREACH FUNDING: 2

PROJECT STAFF: Gilbert M. Foley, Director; Lynn Brown, Assistant Director
Resource Manager, Pediatric Consultant, Physical Therapist, Occupational Therapist, Psychiatric Social Worker

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
EHA-B Preschool Program and Berks County Intermediate Unit #14

DESCRIPTION OF DEMONSTRATION MODEL:

FCRP serves multihandicapped infants and preschoolers in a family context. Emphasis is placed on children with mental retardation and neuromotor dysfunction. The project's theoretical orientation integrates a developmental frame of reference and object-relation analysis. This approach implies sequential learning and mastery of skills to meet age-appropriate expectations.

MAJOR OUTREACH OBJECTIVES:

The major objectives are to:

- Provide existing Pennsylvania preschools with a model for family-centered services to multihandicapped preschoolers, through replication (in its entirety, or by component) over a 3-year period, involving approximately 4,500 children.
- Disseminate materials and methodologies developed by FCRP.
- Present principles for IEPs and Family Development Plans.
- Train staff in the transdisciplinary approach and the concepts of role extension, role release, and arena evaluation.
- Enhance understanding of the attachment/bonding process and train personnel to use the project's Attachment-Separation-Individualization Scale.
- Enhance understanding of family dynamics and the grief process created by the birth of a handicapped child, and techniques for family intervention.
- Teach techniques embodied in "Mastery of Developmental Tasks Training."
- Provide a system for tracking and assessing child/family development.
- Train personnel in those components of FCRP which can be generalized to a school-age population.

ACCOMPLISHMENTS DURING 1979:

The project has provided training at numerous workshops sponsored by both state and out-of-state agencies. Additional activities include training on the DDST to a local school district, transdisciplinary team training to a health project, and a 2-week course ("Infant at Risk") at Wheelock College, Boston.

Materials available include brochures, Cognitive Observation Guide, Individual Program Plan Form, Psychosocial Intake Form, Family Needs Assessment, Family Development Planning Form, and Attachment-Separation-Individualization Scale.

- Number of people trained: 2,117
- Number of sites using model components: 6

JDRP-APPROVED AS OF JANUARY 1, 1980: No

HANDICAPPED INFANTS COMPREHENSIVE OUTREACH MODEL PROGRAM (HICOMP)

FISCAL AGENCY: Pennsylvania State University

ADDRESS: 315 Cedar Building
University Park, Pennsylvania 16802

PHONE: 814/863-2276
YEARS OF OUTREACH FUNDING: 3

PROJECT STAFF: John T. Neisworth & Carol A. Cartwright, Co-Directors;
Frances Moosbrugger, Coordinator; Secretary, 3 Graduate Assistants (.50)

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Pennsylvania State University

DESCRIPTION OF DEMONSTRATION MODEL:

The HICOMP Outreach Project trains community agency personnel working with young handicapped children and their parents. The staff provides training in (1) identifying young handicapped children, (2) using the COMP-Curriculum, (3) managing child behaviors, (4) programming in mainstream settings and (5) coordinating home intervention. HICOMP products have been field-tested in demonstration classrooms and in cooperating field validation sites.

MAJOR OUTREACH OBJECTIVES:

The major objectives are to:

- Train early childhood personnel in early identification and programming for preschool handicapped children.
- Disseminate research and materials for assessment, curriculum, and parent programs.
- Develop strong evaluation designs and systems to document staff and child progress.
- Work with U.S. military in training day care personnel.

ACCOMPLISHMENTS DURING 1979:

In addition to working with local agencies in Pennsylvania, HICOMP has been negotiating extensively with the U.S. Air Force, Army, Navy, and DOD to begin training staff involved in base child care centers throughout the world. Dover AFB Child Care Center has been established as the first of many model centers throughout the world. Target bases for 1980 include Bolling AFB in Washington and Andersen AFB in Guam.

Available materials include: (1) COMP-Curriculum (over 800 developmentally sequenced objectives); (2) COMP-Curriculum Guide (introduction to the COMP-Curriculum); (3) Home Visitor's Guide; (4) Perceptions of Developmental Skills (PODS) (a rating scale for functional skills in four behavioral domains); (5) PODS Scoresheet; (6) Jotty Giraffe (a developmental checklist for parents); (7) Family Inventory (an informal interview schedule regarding family function); (8) COMP-Ident Find/Screen Planning Package (a descriptive manual of child find/screen options); (9) COMP-Ident Assessment Format (a guide on using assessment to identify appropriate program objectives for specific children); (10) Parent Trainer's Manual (establishing and maintaining a parent-training program); (11) Lesson Plan Manual (lesson plans correlated with the COMP-Curriculum).

- Number of people trained: 304
- Number of sites using model components: 20+

JDRP-APPROVED AS OF JANUARY 1, 1980: No

EDUCATION FOR SEVERELY HANDICAPPED OUTREACH PROGRAM

FISCAL AGENCY: Educational Technology Center, Inc.

ADDRESS: Box 64
Foster, Rhode Island 02825

PHONE: 401/943-6954

YEARS OF OUTREACH FUNDING: 1

PROJECT STAFF: Edmond S. Zuromski, Director/Coordinator
2 Field Consultants (Psychologist, Special Educator), Engineer, Adaptive Equipment Technician, Physical TherapistSOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Local agencies and state of Rhode Island

DESCRIPTION OF DEMONSTRATION MODEL:

The Active Stimulation Program is a behavior-based educational model which develops curriculum and equipment for severely and profoundly handicapped children, based on the use of response-contingent sensory stimulation. Services are provided at home, at school and at a state institution. Child progress is measured by an n=1 design which is built into individual activities, a project-developed Behavioral Checklist, and the Hoskins-Squires Test for Reflex and Gross Motor Development.

MAJOR OUTREACH OBJECTIVES:

The project's major objectives are to:

- Provide training to teachers, therapists, and parents on the theory and technique of active stimulation (the combined use of adaptive devices and contingent sensory reinforcement used to teach basic skills to severely and profoundly handicapped infants and children).
- Provide training in the areas of behavioral management, handicaps of infancy and childhood, and the use of technology in teaching severely and profoundly handicapped.
- Stimulate replication sites for the Active Stimulation Program.
- Solve technological problems, especially those relevant to the severely and profoundly handicapped child.

ACCOMPLISHMENTS DURING 1979:

Since July 1, 1979, the program has trained over 300 teachers, therapists, and parents on the theory and technique of active stimulation programming at 10 replication sites in seven states. Severely and profoundly handicapped children were assessed on an individual basis to ascertain needs which could be fulfilled through current technology.

Project materials available include a manual on the Theory and Technique of Active Stimulation Programming.

- Number of people trained: 325
- Number of sites using model components: 15

JDRP-APPROVED AS OF JANUARY 1, 1980: No

INTERSECT

FISCAL AGENCY: Urban Observatory

ADDRESS: 1101 17th Avenue South
Nashville, Tennessee 37212

PHONE: 615/327-2948
YEARS OF OUTREACH FUNDING: 6

PROJECT STAFF: Janet E. Coscarelli, Director
Special Education Specialist, Dissemination Specialist, Secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Metropolitan Schools, Nashville, Davidson County

DESCRIPTION OF DEMONSTRATION MODEL:

The demonstration model is a home-based parent-infant training program for young communicatively impaired children, birth to 3.

MAJOR OUTREACH OBJECTIVES:

The project's major objectives are to:

- Provide services to professionals and paraprofessionals who serve communicatively handicapped children ages birth to 6.
- Provide screening identification to children with communicative handicaps.
- Provide high quality materials to be used by persons dealing with handicapped children.

ACCOMPLISHMENTS DURING 1979:

Intersect has screened over 2,000 preschool children. It has provided inservice training to 100 teachers in regular and special day care centers, 100 kindergarten teachers, and 1,000 Head Start teachers. Print and audiovisual materials are available from the project.

- Number of people trained: 1,200
- Number of sites using model components: 5

JDRP-APPROVED AS OF JANUARY 1, 1980: No

REGIONAL INTERVENTION PROGRAM EXPANSION PROJECT (RIP)

FISCAL AGENCY: RIP Advisory Committee, Inc.

ADDRESS: 2400 White Avenue
Nashville, Tennessee 37204

PHONE: 615/269-5671
YEARS OF OUTREACH FUNDING: 2

PROJECT STAFF: Matthew A. Timm, Director; Sarah Rule, Coordinator
Component Directors, Field Coordinators, Secretary, Project Evaluator
(part-time)

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Tennessee Department of Mental Health and Mental Retardation and the Middle Tennessee Mental Health Institute

DESCRIPTION OF DEMONSTRATION MODEL:

The RIP program is a parent-implemented service for preschoolers (birth to 6) which employs a noncategorical approach. Criterion-referenced intervention programs developed for parent and child are conducted by the parent in both clinic and home settings. Program-specific direct observation measures are used to determine child progress. Following completion of intervention with their own children, parents participate in the delivery of services to other families through a system of payback of time.

MAJOR OUTREACH OBJECTIVES:

Major project objectives are to:

- Foster replication of the parent-implemented program model throughout the state and nation.
- Develop mass media and group instruction programs to promote community awareness of the importance of early intervention in handicapping conditions.
- Develop training programs for parents, professionals, and paraprofessionals engaged in early intervention programs.

ACCOMPLISHMENTS DURING 1979:

Between January 1 and September 30, 1979, 275 families were served by RIP Expansion Projects in Tennessee, Ohio, Connecticut, and Ontario. Assessments of parental awareness of the need for early intervention and currently available services for handicapped preschoolers were made in three rural Tennessee communities. Pilot group instruction and mass media awareness campaigns have been launched in two of the three communities. Field-based training in early intervention techniques was provided to 51 Head Start teachers and Public Health home educators in 18 counties.

The project has available these materials: (1) Using Skills Effectively and Using Resources Effectively (field-based training programs in early intervention techniques, including 14 training videotapes, manuals, and a slide-tape production); (2) Child Check Diary (preliminary screening diary for parents).

- Number of people trained: 685
- Number of sites using model components: 10

JDRP-APPROVED AS OF JANUARY 1, 1980: No

CLINCH-POWELL EDUCATIONAL COOPERATIVE--OUTREACH PROJECT

FISCAL AGENCY: Clinch-Powell Educational Cooperative

ADDRESS: Box 279

Tazewell, Tennessee 37879

PHONE: 615/626-4677, -9270

YEARS OF OUTREACH FUNDING: 3

PROJECT STAFF: Vicki S. Dean, Director
Trainer

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Local Education Agencies (four rural systems)

DESCRIPTION OF DEMONSTRATION MODEL:

The Clinch-Powell Educational Cooperative has developed a model home-based program to serve preschool handicapped children and their parents. The steps in the model are: (1) assessment and individualized curriculum planning, (2) weekly home visits by trained paraprofessionals, and (3) mainstreaming into regular classroom sessions.

MAJOR OUTREACH OBJECTIVES:

- The project's major objectives are to:
- Provide training to replication sites in meeting early education needs of handicapped children by employing parent assistance in the home.
 - Develop parent training materials in the areas of education and health needs.
 - Conduct awareness activities throughout the state and region.

ACCOMPLISHMENTS DURING 1979:

The CPEC Outreach Project has developed awareness and training materials. Replication sites have received training, follow-up, and evaluation assistance.

These project-developed materials are available: (1) nutrition education materials, (2) training manual, and (3) Parent/Child Activity Guide.

- Number of people trained: 155
- Number of sites using model components: 8

JDRP-APPROVED AS OF JANUARY 1, 1980: No (This project is currently applying for add-on validation to an existing CPEC home-based model for non-handicapped children which received approval in 1977.

KINDLING INDIVIDUAL DEVELOPMENT SYSTEMS (PROJECT KIDS)

FISCAL AGENCY: Dallas Independent School District

ADDRESS: 3700 Ross Avenue
Dallas, Texas 75204

PHONE: 214/824-1620, ext. 342
YEARS OF OUTREACH FUNDING: 2

PROJECT STAFF: Ruth Turner, Director; Ruth Wilson, Coordinator
Specialist Appraisal/Curriculum, Replication Specialist Parent Involvement

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Public school district

DESCRIPTION OF DEMONSTRATION MODEL:

Project KIDS is a home to center transition model serving infants (birth to 2 years) in the home, toddlers (2 to 3 years) in a center, and preschoolers (3 to 5 years) in early childhood public school classes. The project utilizes a developmental/prescriptive approach with strong parent involvement and evaluation components.

MAJOR OUTREACH OBJECTIVES:

- Outreach objectives, from local to national levels, are to:
- Replicate all Project KIDS program components in all early childhood sites in Dallas public school districts.
 - Continue replication activities of selected program components in the five regional outreach school districts currently being served.
 - Replicate all or a portion of the program components in two additional school districts in the area served by the educational service center for Region X.
 - Conduct demonstration and information-sharing activities to increase public awareness of the program model and of the importance of early intervention.
 - Participate in the Triple T Consortium, a statewide organization for projects serving handicapped infants and toddlers, to promote and encourage programs for handicapped infants (birth to 3 years) and to promote early intervention.
 - Disseminate Project KIDS appraisal, curriculum, staff development, evaluation, and parent involvement packages to other early childhood programs, public and private schools, and regional service centers to facilitate the development of quality programs.

ACCOMPLISHMENTS DURING 1979:

Project KIDS has conducted regional conferences, provided on-site technical assistance in 20 schools, distributed 247 dissemination packages, and participated in a state consortium for special education.

Materials available from the project include packets on parent involvement, program evaluation, appraisal, and staff development.

- Number of people trained: 100
- Number of sites using model components: 20

JDRP-APPROVED AS OF JANUARY 1, 1980: No

DEVELOPMENTAL EDUCATION BIRTH THROUGH TWO
(DEBT)--OUTREACH

FISCAL AGENCY: Lubbock Independent School District (ISD)

ADDRESS: 1628 19th Street
Central Office Annex
Lubbock, Texas 79401

PHONE: 806/747-3838
YEARS OF OUTREACH FUNDING: 3

PROJECT STAFF: Gloria Galey, Director; Dianne Garner, Coordinator
Teacher Trainer Specialist, Secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Demonstration model: Lubbock ISD; Outreach replication sites: Local education agencies and service organizations.

DESCRIPTION OF DEMONSTRATION MODEL:

The home-based preventive special education program serves handicapped children ages birth through 2 years. Quarterly child progress evaluations include informal observations, DDST (for screening purposes), REEL, Bayley, Vineland, and other appropriate instruments.

MAJOR OUTREACH OBJECTIVES:

- The project's outreach efforts are to:
- Provide a training program for replication of the DEBT infant intervention model in outlying communities.
 - Identify support services and/or resources available to parents of handicapped infants
 - Provide inservice training to personnel from Mental Health-Mental Retardation Child Centers and university students.
 - Disseminate project information and training materials.
 - Develop a comprehensive training notebook to be used as a training instrument.

ACCOMPLISHMENTS DURING 1979:

Project information was disseminated to 55 other BEH projects, the mental health/mental retardation program, and early childhood programs. The First Annual Interlocking Regional Services Conference for Handicapped Infants was held. Training programs were presented at BEH projects, universities, and the Cerebral Palsy Institute. On-site training was provided for university students and regional early childhood teachers. Project staff actively participated in the Triple T Consortium and worked for improved health, education, and welfare services in the region.

These project-developed materials are available: DEBT Diaper Dudes Water/Play Curriculum; DEBT GOSPEL (Guidebook of Objectives for Systematic Procedures through Efficiency and Logic); Comprehensive Teacher Training Materials Notebook; Brochures (Demonstration and Outreach); LOVE, YOUR BABY (letters from handicapped babies); and DEBT's Handbook of Service.

- Number of people trained: 95
- Number of sites using model components: 4

JDRP-APPROVED AS OF JANUARY 1, 1980: No

MULTI-AGENCY PRESCHOOL OUTREACH PROJECT

FISCAL AGENCY: Utah State University, Affiliated Exceptional Child Center

ADDRESS: UMC 68
Utah State University
Logan, Utah 84322

PHONE: 801/752-4100, ext. 8273
YEARS OF OUTREACH FUNDING: 3

PROJECT STAFF: Glendon Casto, Director; Debra Tolfa, Coordinator
Special Educator, Speech Pathologist, Physical Therapist, Psychologist

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Title XX through Utah Division of Family Services

DESCRIPTION OF DEMONSTRATION MODEL:

The Multi-Agency Preschool is a home-based (ages birth to 3 years) and community-based (ages 3 to 5 years) intervention program in rural remote areas. The basis of the intervention is a curriculum and monitoring system (CAMS) developed by the project in five developmental areas. The program utilizes (1) parents of preschool handicapped children as intervention agents by providing them with the CAM curriculum, and (2) existing community preschool and day care services to mainstream young handicapped children (3 to 5 years) by providing CAMS materials and training parents and teachers. Measures of child progress include: Bayley, VMI, PPVT, Boehm Concept Development, Assessment of Children's Language Comprehension, and criterion tests in the five developmental areas.

MAJOR OUTREACH OBJECTIVES:

- The project's major objectives are to:
- Provide outreach assistance to projects in the Utah Consortium of Preschool Programs, Nevada Division of Mental Retardation, Community Training Centers in southern Idaho and New Mexico, Office of Navajo Economic Opportunity Head Start Centers, and therapeutic day center in Tuba City.
 - Provide training workshops.
 - Train key personnel at project sites in the use of the model and the CAM curriculum.
 - Collect and analyze data related to outreach effectiveness.
 - Continue development of a cognitive package.

ACCOMPLISHMENTS DURING 1979:

The project trained 50 early childhood personnel and the parents of 103 children placed on CAMS programs.

Curriculum materials and criterion tests are available from Walker Educational Book Corporation, New York City.

- Number of people trained: 153
- Number of sites using model components: 25

JDRP-APPROVED AS OF JANUARY 1, 1980: No

PROJECT SKI*HI OUTREACH

FISCAL AGENCY: Utah State University

ADDRESS: Dept. of Communicative
Disorders, UMC 10
Utah State University
Logan, Utah 84322

PHONE: 801/750-1369
YEARS OF OUTREACH FUNDING: 5

PROJECT STAFF: Thomas C. Clark, Director; Susan Watkins, Coordinator
Product Development Specialist, Information Disseminator, Technical Assistance
Trainer

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
State of Utah legislative appropriation through the Utah School for the Deaf

DESCRIPTION OF DEMONSTRATION MODEL:

The administration component includes child identification and processing and program management. Direct services are provided to hearing impaired children ages birth to 6 and their families, including home visits, curriculum teaching, hearing aid management, and auditory communicative and language skills. Support services include audiological, psychological, and materials support.

MAJOR OUTREACH OBJECTIVES:

The outreach objective of Project SKI*HI is to provide assistance resulting in (1) high quality home intervention services for presently unserved preschool-aged hearing impaired children, and (2) improved services for those presently receiving some services. Components of this outreach assistance are awareness activities, development of curricular materials, stimulation and development of new programs, and training.

ACCOMPLISHMENTS DURING 1979:

Awareness activities included seven dissemination workshops, one NDN awareness conference, the production of a film, and the dissemination of over 500 newsletters, 1000 brochures, and 170 project manuals. A new language development scale and communication program were developed, and a total communication program written. Five new programs were stimulated. Extensive technical assistance was provided to most replication sites. The project also conducted a 4-week basic training course and eight workshops.

These materials are available: (1) project curricular/programming manual, (2) slide-tape presentations, (3) set of 23 videocassettes to teach total communication, (4) set of six videotapes plus manual for training in SKI*HI Model, (5) visual aids on hearing aids, (6) SKI*HI Receptive Language Test, and (7) SKI*HI Language Development Scale.

- Number of people trained: 193
- Number of sites using model components: 25

JDRP-APPROVED AS OF JANUARY 1, 1980: Yes

EDUCATION FOR MULTIHANDICAPPED INFANTS--IMPACT

FISCAL AGENCY: University of Virginia Medical Center

ADDRESS: EMI-IMPACT
University of Virginia
Medical Center
Box 232
Charlottesville, Virginia 22908

PHONE: 804/924-5161, ext. 268
YEARS OF OUTREACH FUNDING: 4

PROJECT STAFF: Wanda B. Elder, Director; Susan N. Hastings, Associate
Director; Neonatal Outreach Coordinator, Medical Director, Secretary/
Coordinator

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Hospital Education

DESCRIPTION OF DEMONSTRATION MODEL:

Physically handicapped, developmentally delayed infants are first seen in the Neonatal Intensive Care Unit Program. Once at home, the infants and their parents are enrolled in a home- and center-based program. The infant and parents are seen individually at the center three times a month and at home once a month. Children are assessed bimonthly using the EMI Scale and videotape. The eclectic EMI Curriculum emphasizes Piagetian principles and contingent reinforcement.

MAJOR OUTREACH OBJECTIVES:

- The project's primary objectives are to:
- Provide training and technical assistance to medical, educational, and other personnel who wish to provide or improve direct services for handicapped infants and their families.
- Assist new and existing infant programs through the Virginia Infant Programs Consortium and Virginia Association of First Chance Projects.
- Train nursery personnel to conduct Newborn Intensive Care Unit Programs of Intervention.
- Enhance public awareness of needs of very young handicapped infants.
- Disseminate EMI products.

ACCOMPLISHMENTS DURING 1979:

The project has provided ongoing training and TA to replication sites, sponsored statewide infant program gatherings for mutual problem solving, and arranged a 2-day conference on infants at risk. The final edition of the Newborn Intensive Care Unit Intervention Manual was disseminated, along with over 5,000 other printed products. The project actively participated in the Virginia Association of First Chance Projects.

The project-developed materials available include: (1) EMI Assessment Scale (birth to 24 months), (2) EMI Curriculum, (3) Nursery Intervention Manual, (4) bibliographies, and (5) infant learning packets.

- Number of people trained: 822 medical personnel and students
771 infant service providers
- Number of sites using model components: 8

JDRP-APPROVED AS OF JANUARY 1, 1980: No

CHILD DEVELOPMENT RESOURCES OUTREACH PROJECT (CDR)

FISCAL AGENCY: Child Development Resources

ADDRESS: P.O. Box 299
Lightfoot, Virginia 23090

PHONE: 804/565-0303
YEARS OF OUTREACH FUNDING: 2

PROJECT STAFF: Corrine W. Garland, Director; Barbara Kniest, Coordinator
Administrative Assistant, 2 Trainers

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

The CDR Infant Program is funded by the State Department of Mental Health and Mental Retardation, United Fund, local tax dollars, and private contributions; preschool classrooms are funded and operated by public schools.

DESCRIPTION OF DEMONSTRATION MODEL:

The project offers interdisciplinary programs for handicapped and developmentally disabled infants (birth to 2) using the parent as the primary teacher. Children are assessed quarterly. Case managers are chosen from among an educational team. Weekly home visits are conducted to help parents teach the child the skills included in the IEP, which is the basis for each child's program. Weekly parent group meetings provide information about child development, child management, and advocacy. Developmental day care is provided for handicapped children and their siblings during parent meetings.

MAJOR OUTREACH OBJECTIVES:

Major objectives are to:

- Disseminate information and provide training which will lead to replication of the CDR Infant Program or its components.
- Develop and distribute products which will inform target audiences about CDR Infant and Outreach Projects or which will assist in the replication of program components.
- Coordinate CDR Outreach Project activities with those state agencies having responsibility for the education and treatment of young handicapped children.
- Continue activities to maintain or increase local awareness, support and funding.

ACCOMPLISHMENTS DURING 1979:

Five replication sites have been established and trained during 1979. Three sites received training to replicate the CDR infant program. Two additional sites were trained to replicate child find activities. CDR products are being used in 47 states and three foreign countries. CDR plays a leadership role in the consortium of Virginia BEH projects.

Materials available include: (1) Skills Inventory for Parents (system for taking an inventory of parenting skills), (2) Skills Inventory for Teachers (staff development needs of home-based teachers), (3) Parent Group Curriculum, (4) Teaching Activities for Parents (activities for parents of children birth to 2).

- Number of people trained: 80
- Number of sites using model components: 5

JDRP-APPROVED AS OF JANUARY 1, 1980: No

NORFOLK EARLY EDUCATION FOR HANDICAPPED CHILDREN
(INDIVIDUALS-IN-GROUPS)

FISCAL AGENCY: Old Dominion University Research Foundation

ADDRESS: Child Study Center
 Old Dominion University
 Norfolk, Virginia 23508

PHONE: 804/467-8308
YEARS OF OUTREACH FUNDING: 2

PROJECT STAFF: Ken Reavis & Marge Rae, Co-Directors
 Trainer

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Department of Mental Health and Mental Retardation (state)

DESCRIPTION OF DEMONSTRATION MODEL:

The preschool classroom, serving children aged 4 to 8 with moderate to severe handicaps, is housed in the Southeastern Virginia Training Center, a residential facility. The program implements the Individuals-in-Groups curriculum with an emphasis on task analysis and direct measurement of child progress. Precision teaching techniques are used and monthly summaries are made that give inter- and intra-child growth comparisons.

MAJOR OUTREACH OBJECTIVES:

This project provides training in two community service models designed for moderately to profoundly handicapped/high-risk children. One is an infant/child home educational model with parents as the teaching agent for children from birth to 4 years of age. The second is a data-based preschool classroom model for children 4 to 8 years of age with developmental ages 2 to 4 years. The classroom model integrates one-to-one teaching programs in group activities through unit/themes. Both models emphasize approaches of task analysis and direct measurement/evaluation of skills. The project provides training in these areas: (1) assessment, via the "Individuals-in-Groups" assessment kit, an instrument based on performance rate measures of 83 behaviors; (2) curriculum, based on the premise that handicapped children can be provided with normative classroom activities while at the same time meeting their individual needs; (3) evaluation, a non-discriminatory monitoring system based on learning as opposed to performance; (4) a model for outreach, provided through three levels of training workshops, direct training of service personnel at project demonstration sites in southeastern Virginia, and training of coordinators from the agency to return and train their staffs.

ACCOMPLISHMENTS DURING 1979:

Commitments for training an additional seven sites have been obtained for the remainder of the fiscal year.

- Number of people trained: 296
- Number of sites using model components: 19

JDRP-APPROVED AS OF JANUARY 1, 1980: No

A MODEL PRESCHOOL CENTER FOR HANDICAPPED CHILDREN
(WITH TRAINING, RESEARCH, AND SERVICE COMPONENTS)

FISCAL AGENCY: University of Washington

ADDRESS: Experimental Education Unit PHONE: 206/543-4011
Child Development and Mental YEARS OF OUTREACH FUNDING: 8
Retardation Center, WJ-10
University of Washington
Seattle, Washington 98195

PROJECT STAFF: Alice H. Hayden, Director
12 Teachers, 7 Professional Support Staff, Evaluator, 5 Coordinators, 12 Interns, 4 Dissemination Specialists, 7 Clerical Support Staff

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Office of the State Superintendent of Public Instruction

DESCRIPTION OF DEMONSTRATION MODEL:

The Model Preschool uses a diagnostic-prescriptive/behavioral model, in which each child is encouraged to make the best possible progress toward developmental norms. Parents are actively involved in the program. The setting for the Center is the Experimental Education Unit, an award-winning school building especially designed for handicapped children. Each child is assessed on several measures quarterly. Direct and daily measurement is a factor in monitoring and, when necessary, changing child programs.

MAJOR OUTREACH OBJECTIVES:

Two programs of the Model Preschool Center have been approved for adoption/adaptation by the USOE Joint Dissemination Review Panel--the Communication Model and the Program for Down's Syndrome and other Developmentally Delayed Children Model. Highly trained outreach trainers, supplemented by written materials developed at the center, provide training and technical assistance to teachers, parents, administrators, support professionals, and others who work with young handicapped children in all parts of the country and in several foreign countries. Training is conducted at the field site, at the demonstration center, in workshops, or in combination.

ACCOMPLISHMENTS DURING 1979:

The Model Preschool Outreach project has participated in conferences and workshops in several states and at the national level. Outreach trainers have traveled to over 50 sites in several states to train teachers in the procedures employed at the demonstration center. In addition, the center conducted an extensive mailing of over 8,000 pieces of information in response to requests for information about the center or its procedures.

Both descriptive materials and materials of direct use to teachers in the classroom are available. Over 50 new items are produced each year.

- Number of people trained: 2,000+
- Number of sites using model components: 50+

JDRP-APPROVED AS OF JANUARY 1, 1980: Yes

THE COMPREHENSIVE TRAINING PROGRAM FOR INFANTS
AND YOUNG CEREBRAL PALSID CHILDREN
(C.P. PROJECT)

FISCAL AGENCY: Curative Rehabilitation Center

ADDRESS: 9001 W. Watertown Plank Rd. PHONE: 414/259-1414
Milwaukee, Wisconsin 53226 YEARS OF OUTREACH FUNDING: 7

PROJECT STAFF: Rona Alexander, Director; Linda Kliebhan, Assistant
Director; Audio-Visual/Program Specialist, Typist

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Federal and state funding, insurance and private patient fees.

DESCRIPTION OF DEMONSTRATION MODEL:

The project serves children birth to 3 with neuro-motor involvement which results in feeding, speech, and/or language problems. Services include speech, occupational therapy, nutrition, psychology, special education, social service, and medical. Pre/posttest data collected from 1970-73 were analyzed using tests such as REEL, Meacham Verbal Language Development Scale, and the PPVT. The mean approached a 12-month gain over a 12-month period. These tests, the project-developed Pre-Speech Assessment Scale, and other language assessment tools are used.

MAJOR OUTREACH OBJECTIVES:

- The project's objectives are to:
- Train teams of staff from replicating agencies in 6-day Fundamental Guidelines Workshops.
 - Train the speech pathologist of each team in the administration of the Pre-Speech Assessment Scale.
 - Present lectures and workshops on a national basis emphasizing the need for early intervention and programming for handicapped children.
 - Revise and/or develop evaluative materials in the areas of nutrition, pre-speech and feeding, and pre-linguistics and cognition.
 - Maintain consultant activities with all replication sites.

ACCOMPLISHMENTS DURING 1979:

Six workshops in the Fundamental Guidelines of Pre-Speech and Language Programming were conducted with staff from 19 new and 15 previously-trained sites. Two workshops on the Pre-Speech Assessment Scale were conducted with 24 participants. Major project materials are being completed in the areas of nutrition and prelinguistic/cognition. Further work towards the completion of the Pre-Speech Assessment Scale has been conducted. Awareness lectures have been conducted throughout the country.

These materials are available to workshop participants only: manual on model components, manual on nutrition (development and assessment), manual and card file in prelinguistics/cognition, card file for language stimulation, and a video-cassette on feeding development.

- Number of people trained: 118
- Number of sites using model components: 65

JDRP-APPROVED AS OF JANUARY 1, 1980: Yes 196

PORTAGE PROJECT

FISCAL AGENCY: Cooperative Educational Service Agency #12

ADDRESS: 412 East Slifer Street
P.O. Box 564
Portage, Wisconsin 53901

PHONE: 608/742-5342
YEARS OF OUTREACH FUNDING: 6

PROJECT STAFF: David E. Shearer, Director; Neal Schortinghuis, Coordinator; 2 Training Specialists

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
State and local

DESCRIPTION OF DEMONSTRATION MODEL:

The Portage Project is a structured, data-based, individualized program which utilizes the parent as a primary teacher to meet the developmental and educational needs of handicapped preschool children. Individualized instructional programming takes place on a daily basis in the home, with a system of accountability and documentation designed to ensure successful implementation.

MAJOR OUTREACH OBJECTIVES:

The project provides three major types of training: (1) training and technical assistance to sites implementing all or a significant part of the Portage Project Model, (2) one- to three-day workshops on selected topics or components of the Model, and (3) three and one-half day on-site workshops in Portage, Wisconsin. The project also conducts awareness workshops.

ACCOMPLISHMENTS DURING 1979:

The project has seven total adaptations, has conducted 24 Portage Project workshops, and has participated in 13 presentations. Further, the Portage Project has responded to over 1000 written requests for information. Over 3000 Portage Guide to Early Education and 400 Portage Parent Program materials have been disseminated.

These materials are available: (1) Portage Guide to Early Education, a developmental curriculum for use with children either handicapped or normal; (2) Portage Parent Program, designed to systematically teach parents appropriate teaching and child management techniques; (3) Portage Guide to Home Teaching, a system through which parents are taught how to teach their own children.

- Number of people trained: 741
- Number of sites using model components: 50+

JDRP-APPROVED AS OF JANUARY 1, 1980: Yes

PROJECT WISP

FISCAL AGENCY: University of Wyoming

ADDRESS: P.O. Box 3224
University Station
Laramie, Wyoming 82071PHONE: 307/766-6145
YEARS OF OUTREACH FUNDING: 1PROJECT STAFF: Janis A. Jelinek, Director; Thomas C. Flamboe, Coordinator
Parent Coordinator, Occupational Therapist, Infant/Toddler SpecialistSOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Laramie Association for Retarded Citizens

DESCRIPTION OF DEMONSTRATION MODEL:

WISP provides a comprehensive preschool program utilizing both center-based and home-based intervention. Services are provided to multihandicapped preschool children (birth to 3 years) and their families residing in Laramie, Wyoming, a significantly rural area. The basic model is developmental-prescriptive. Each child's developmental skills are defined and an Individual Educational Plan (IEP) is developed with parent interface. Pre and post Bayleys, assessment scores, and percentages of objectives met are a few data measures.

MAJOR OUTREACH OBJECTIVES:

Major outreach objectives include stimulating high quality programs, either initiating or maintaining the model through on-site training and technical assistance. This may be short-term technical assistance to programs wishing only partial implementation of the model. Other objectives are state involvement and awareness activities through workshops or conferences and the development and dissemination of project materials and products.

ACCOMPLISHMENTS DURING 1979:

WISP is currently serving eight centers instate and two out-of-state sites. WISP was involved in legislative efforts that secured funds for 12 infant centers in the state, where there is no educational mandate below 5 years of age. WISP has presented its model to two major international conferences and several state conferences. Product development has included nine publications and a brochure sent to over 300 persons.

Dissemination materials include a Materials Bibliography (infant/toddler), Activities Guide, Community Workshop Guide, Infant Research Guide, Training Manual, buttons, T-Shirts, and a Parent Program Guide.

- Number of people trained: 150
- Number of sites using model components: 10

JDRP-APPROVED AS OF JANUARY 1, 1980: No

ALABAMA

DIVISION DIRECTOR:	Bill Berryman	PHONE:	205/832-5867
SIG DIRECTOR:	Bill Ward	PHONE:	205/832-3400
SIG COORDINATOR:	Nell Kilpatrick	PHONE:	205/832-5867
STATE DIRECTOR OF SPECIAL EDUCATION:	Patricia McLaney	PHONE:	205/832-3230
ADDRESS:	Early Childhood Unit State Department of Education 111 Coliseum Boulevard Montgomery, Alabama 36109	YEARS OF FUNDING:	1

STATE LEGISLATION FOR SPECIAL EDUCATION:

Mandated: 6 to 19, all; 3 to 5, deaf, deaf-blind, and multihandicapped

MAJOR OBJECTIVES:

The Alabama SIG has two major goals for 1979-80: (1) to provide technical assistance in early education for the handicapped to LEAs, universities, student divisions of CEC, the Alabama federations of CEC, parents of young handicapped children, and teachers of handicapped children and youth, and (2) to provide inservice training to teachers, administrators, parents, and paraprofessionals serving preschool handicapped children.

ACCOMPLISHMENTS DURING 1979:

The SIG has been moved from the Division of Special Education to the Early Childhood Unit of the State Department of Education. Now underway is development of a needs assessment instrument, planning of a statewide workshop for advocates of preschool and early childhood education in Alabama, and planning of four one-day workshops for regional attendance by professionals from programs working with preschool children.

ALASKA

SIG DIRECTOR: Marge A. Ford PHONE: 907/274-1665
STATE DIRECTOR OF
SPECIAL EDUCATION: John Stamm PHONE: 907/465-2970
ADDRESS: 1020 I Street YEARS OF FUNDING: 3
Anchorage, Alaska 99501

STATE LEGISLATION FOR SPECIAL EDUCATION:

Mandated: 3 to 19

Permissive: below 3 based on individual programs

MAJOR OBJECTIVES:

The Alaska SIG is continuing interagency coordination activities to reduce service gaps for birth to 3 population; updating the Alaska Directory of Services for Preschool Exceptional Children and publication of an additional 1000 copies; developing the Services Matrix for school districts; updating the Survey of Alaskanized Materials for Preschool Exceptional Children; developing a Child Find Manual; continuing TOTLINE; and providing technical assistance for preschool programs (especially those serving birth to 3), a spring parent workshop, and interpretative services.

ACCOMPLISHMENTS DURING 1979:

Priority service needs have been identified through the development of the Services Matrix and TOTLINE data. Interagency agreements have been developed based on these needs, as well as to coordinate child find activities. The Child Find Manual is being developed and the Directory updated. There has been an expansion of services for preschool gifted children.

These materials are available from the Alaska SIG: (1) Alaska Directory of Services for Preschool Exceptional Children, (2) Services Matrix for Alaska Preschool Handicapped Children, and (3) Survey of Alaskanized Materials for Preschool Exceptional Children.

- Sites and services stimulated: Expansion of the Infant Learning Program service areas; finalization stages of a statewide Hearing Impaired Infant Program.

CALIFORNIA

SIG DIRECTOR: Don Keeney PHONE: 916/445-3561

SIG COORDINATOR: Nancy N. Obley PHONE: 916/322-5038

STATE DIRECTOR OF
SPECIAL EDUCATION: Gordon Duck PHONE: 916/445-4036

ADDRESS: California State Dept. of Education YEARS OF FUNDING: 2
Office of Special Education
721 Capitol Mall
Sacramento, California 95814

STATE LEGISLATION FOR SPECIAL EDUCATION:

LEAs implementing the master plan for special education - Mandated: 3 to 4.9, intensive needs; 4.9 to 21, all. Permissive: birth to 3, intensive needs.

LEAs not implementing the master plan - Mandated: 4.9 to 21, all; 3 to 21, severe/profound. Permissive: 3 to 4.9, all except educationally handicapped. Innovative: 18 to 36 months, all except educationally handicapped which are served 3 to 4.9.

MAJOR OBJECTIVES:

The SIG's primary objectives are to:

- Assist in the identification, location and screening of children birth through 4.9 years who are in need of special education services.
- Provide training and technical assistance to programs serving young handicapped children.
- Develop a system to coordinate services provided by public and private agencies.
- Define and disseminate the specific roles and responsibilities, and credentialing requirements of the infant-preschool teacher and the Program Specialist as per AB 1250.
- Establish methods for systematic and effective parent training and education.
- Develop guidelines for providing full service to handicapped infants and preschool children consistent with AB 1250 and P.L. 94-142.
- Identify and disseminate exemplary practices/models to public and private agencies serving preschool handicapped children.
- Stimulate further development of the California's First Chance Consortium and assist other SEAs in developing their own consortia.

ACCOMPLISHMENTS DURING 1979:

Implementation of the SIG was hindered by the passage of Proposition 13 in June 1978. With a personnel hiring freeze imposed in July 1978, it was not possible to hire the full-time project coordinator until July 1979. Therefore, the primary accomplishment was the Interstate Conference on Consortium Development conducted in August 1979. The purpose of this working conference was to develop guidelines to assist other states in developing consortia for early childhood education for the handicapped. To date, these guidelines are in draft form.

The SIG is disseminating a brochure identifying and describing the programs provided by members of California's First Chance Consortium.

- Number of people trained: 325

COLORADO

SIG DIRECTOR: Brian A. McNulty PHONE: 303/839-2727
STATE DIRECTOR OF
SPECIAL EDUCATION: Peter Fanning PHONE: 303/839-2727
ADDRESS: Colorado Dept. of Education YEARS OF FUNDING: 4
201 E. Colfax Avenue
Denver, Colorado 80203

STATE LEGISLATION FOR SPECIAL EDUCATION:

Mandated: 5 to 21

Permissive: birth to 5

MAJOR OBJECTIVES:

Primary SIG objectives are to develop (1) a prescreening questionnaire to initiate referrals into the child find system; (2) a procedures and guidelines document for public school programs serving preschool handicapped; (3) interagency agreements for the birth to 5 handicapped population with social services, health, institutions, and ACYF.

ACCOMPLISHMENTS DURING 1979:

A training model was developed and implemented for teaching psychology, speech/ language and ECE teachers to work with handicapped preschoolers. Certification standards were adopted. A third university training program was initiated. The SIG sponsored a series of statewide workshops for parents (Parents Encouraging Parents, PEP), and an Early Childhood Models Conference. Work continues with preschool and day care programs. Nine model projects to work with parents of preschool handicapped children (funded under Preschool Incentive Grant) were established.

Materials available from the SIG include: training/process model for psychology, speech/language therapists, and ECE teachers; Child Find: A Handbook for Implementation; bilingual brochure on developmental milestones; Competency Evaluation of Child Development; certification standards for birth to 8 early childhood handicapped; monitoring forms for early childhood special education programs and child find; Colorado Process Model for identification, assessment and placement; and Resources for Early Education Programs for Children with Handicaps.

- Number of people trained: 500
- Sites and services stimulated: (1) 9 new model projects for parent/family support, (2) Parents Encouraging Parents (PEP) Network, and (3) a new university training program.

CONNECTICUT

SIG DIRECTOR: Virginia Guldager PHONE: 203/566-5866

SIG COORDINATOR: Judy Hasty Larson PHONE: 203/566-3444

STATE DIRECTOR OF
SPECIAL EDUCATION: Tom B. Gillung PHONE: 203/566-4383

ADDRESS: State Department of Education YEARS OF FUNDING: 2
Bureau of Pupil Personnel and
Special Education Services
P.O. Box 2219, 165 Capitol Avenue
Hartford, Connecticut 06119

STATE LEGISLATION FOR SPECIAL EDUCATION:

Mandated: eligible hearing impaired children who turn 3 years of age by January 1 of the school year and for all other eligible children who turn 4 years by that date.

Permissive: birth to 3, or to 2.8 for hearing impaired

MAJOR OBJECTIVES:

The major SIG objectives are to:

- Maintain and continue negotiations around state level interagency contacts.
- Continue to implement collaborative components in the three project pilot sites.
- Evaluate collaborative service components in the three project pilot sites.
- Provide consultation and information or interagency collaboration to LEAs and other agencies.
- Continue consultation and participation with the Health/Education Collaborative Project.

ACCOMPLISHMENTS DURING 1979:

The SIG developed a directory of early childhood special education programs in LEAs. It assisted in the implementation and ongoing operation of three pilot sites to demonstrate interagency cooperative efforts. Negotiations with other state agencies regarding the delivery of comprehensive services to preschoolers with special needs were carried out, resulting in initial efforts toward an agreement with the State Department of Health. An Early Childhood Symposium featuring Dr. Irving Lazar was made available to 250 people from throughout the state.

- Number of people trained: 300
- Sites and services stimulated: (1) 3 pilot sites; (2) increased health education collaboration for preschool special education.

GEORGIA

SIG DIRECTOR: Alan White PHONE: 404/656-6319
STATE DIRECTOR OF SPECIAL EDUCATION: Arthur E. Bilyeu PHONE: 404/656-2425
ADDRESS: State Department of Education YEARS OF FUNDING: 1
State Office Building
Atlanta, Georgia 30334

STATE LEGISLATION FOR SPECIAL EDUCATION:

Mandated: 5 to 18

Permissive: birth to 4 and 19 to 21

MAJOR OBJECTIVES:

The SIG's major objectives are to:

- Identify existing services and resources for preschool handicapped children in Georgia by means of a statewide survey.
- Identify the needs of LEAs and public and private agencies that serve preschool handicapped children in Georgia by means of a statewide needs assessment.
- Provide technical assistance to LEAs in the provision of preschool programs fully or partially funded through Title VI-B Preschool Incentive Grant monies.
- Initiate the development of a state interagency council for all agencies dealing with preschool handicapped children.
- Coordinate preservice and inservice training programs for parents, teachers, and other agency personnel involved in the education of preschool handicapped children.
- Disseminate information on educational programs and resources for working with preschool handicapped children through the Georgia Learning Resources System.
- Provide statewide leadership and personnel for meeting preschool grant objectives through the employment of a state consultant for preschool program implementation and one secretarial staff person.

ACCOMPLISHMENTS DURING 1979:

The project has interviewed candidates for the position of project coordinator. A task force (consortium) composed of HCEEP project directors, SED directors, school system special education coordinators, DHR training center personnel, and shared service directors has been organized. This task force is developing a needs assessment survey and proposing programs for spring regional workshops.

ILLINOIS

SIG DIRECTOR: Julie Carter PHONE: 217/782-6601
 SIG COORDINATOR: Dan Whitley PHONE: 217/785-1639
 STATE DIRECTOR OF SPECIAL EDUCATION: Joseph Fisher PHONE: 217/782-6601
 ADDRESS: Illinois State Board of Education YEARS OF FUNDING: 2
 Department of Specialized Educational Services
 100 North First Street
 Springfield, Illinois 62777

STATE LEGISLATION FOR SPECIAL EDUCATION:

Mandated: 3 to 21, all categories; from birth for deaf/blind
 Permissive: birth to 3, with no state funds

MAJOR OBJECTIVES:

Major objectives of the SIG are to:

- Establish interagency agreements between the management representatives of the Department of Public Health, the Department of Children and Family Services, the Illinois State Board of Education, the Division of Services for Crippled Children, the Special Assistant to the Governor on Children's Affairs, and the Department of Mental Health and Developmental Disabilities.
- Conduct a study to determine the feasibility of performing intra-agency tracking of very young handicapped children.
- Design, field test and evaluate a series of multimedia, semi-programmed training modules which will constitute an interagency inservice education network.

ACCOMPLISHMENTS DURING 1979:

Four one-day workshops were held toward accomplishing the interagency objective. Management representatives from the agencies are assessing the intra-agency needs of their respective agencies. Needs statements will be validated by the Illinois First Chance Consortium, and interagency agreements will be written. Management representatives of the agencies submitted content and criteria for a computer tracking system to SIG staff. Literature pertaining to issues rated to privacy and confidentiality was reviewed. Four national authorities were identified to address these issues. A legal consultant also provides advice to the staff. A systems analyst has been identified who will assist in the development of the computer paradigms. Regarding the multimedia training modules, it was determined that a single technical assistance package was impractical for numerous reasons: regional geographic boundaries are not consistent between agencies, types of clients served and services available by regions are sometimes mutually exclusive, etc. Subsequently, each agency will select a target region and a specific technical assistance package will be prepared.

- Number of people trained: 75

INDIANA

SIG DIRECTOR:	Sara Cochran	PHONE:	317/927-0232
SIG COORDINATOR:	Marcia J. Johnson	PHONE:	317/927-0239
STATE DIRECTOR OF SPECIAL EDUCATION:	Gilbert Bliton	PHONE:	317/927-0216
ADDRESS:	Indiana Department of Public Instruction Division of Special Education Room 229, State House Indianapolis, Indiana 46204	YEARS OF FUNDING:	3

STATE LEGISLATION FOR SPECIAL EDUCATION:

Mandated: 6 to 18

Permissive: 3 to 5 and 18 to 21 for all handicaps
6 months to 5 and 18 to 21 for deaf

MAJOR OBJECTIVES:

Major SIG objectives are to:

- Develop interagency agreements in five pilot sites.
- Develop and print a procedural manual on interagency involvement and disseminate it to state and local personnel.
- Develop an early childhood/special education teacher certification pattern.
- Recommend to colleges and universities that they establish early childhood/special education teacher training programs.
- Develop and implement recommendations for a continuum of service alternatives in early childhood/special education in Indiana.

ACCOMPLISHMENTS DURING 1979:

Teachers, administrators, superintendents, school board members, graduate and undergraduate students were trained in six workshops, one symposium, and two summer institutes.

Project-developed materials include: (1) Indiana's Preschool Resource Manual, (2) needs assessment instrument to determine LEA needs for technical assistance, (3) one planning district's interagency agreement between the LEA and other community agencies that provide services to preschool handicapped children.

- Number of people trained: 909
- Sites and services stimulated: Twenty-five LEAs were provided technical assistance in planning and/or implementing preschool special education programs.

KANSAS

SIG DIRECTOR: Phyllis Ellis PHONE: 913/296-3866

SIG COORDINATORS: Lucile Paden & PHONE: 913/296-3866
Janelle Mulvenon 913/827-6301

STATE DIRECTOR OF SPECIAL EDUCATION: James E. Marshall PHONE: 913/296-3866

ADDRESS: Kansas Preschool Handicapped Project YEARS OF FUNDING: 3
Kansas State Department of Education
120 East 10th Street
Topeka, Kansas 66612

STATE LEGISLATION FOR SPECIAL EDUCATION:

Permissive: birth to 5 by September 1 in schools with kindergartens, and to age 6 by September 1 for others.

MAJOR OBJECTIVES:

The goal for the Kansas SIG is to facilitate the implementation of services in early childhood education for the handicapped by providing leadership and structure through (1) development of a coordinated state system of interagency services for young handicapped children, (2) formulation of a collaborative system of inservice and preservice for the development of personnel, and (3) development of better communication and cooperation with the medical community in relation to the needs of young handicapped children.

ACCOMPLISHMENTS DURING 1979:

Standards for Early Childhood Handicapped Programs were adopted as part of the Kansas Plan for Special Education. The Kansas SIG has a state-level interagency coordination committee. Twelve local interagency teams actively plan and coordinate local activities. Task forces are working on teacher certification recommendations for early childhood handicapped and for development of training sequences in the teacher training institutions. A survey of inservice needs was conducted and mailing lists were provided for appropriate workshops. Local and regional inservice has been supported. In collaboration with Child Find, Count Your Kid In, a series of regional workshops have been offered to pediatricians and other medical professionals.

Available materials include: (1) Whispers, a slide-tape for public awareness, need, rationale, and interagency approach; (2) Road Blocks, a slide-tape presenting responses to usual questions regarding interagency services; (3) Regulations, the Early Childhood Program standards from the Kansas State Plan for Special Education.

- Number of people trained: 359 in statewide and regional workshops
- Sites and services stimulated: Eight new public school programs were partially funded by incentive grants. A new public school program and planning project were funded as Title VI-B special projects. Three Title VI-D special projects are continuing and six other districts have preschool classrooms. Collaboration among the SIG, Title VI-D coordinator and teacher training institutions resulted in 52 students receiving credit for a course taught on weekends by two of the state universities.

LOUISIANA

SIG DIRECTOR: Daphne Thomas PHONE: 504/342-1641

STATE DIRECTOR OF
SPECIAL EDUCATION: Henry Smith PHONE: 504/342-3633

ADDRESS: P.O. Box 44064 YEARS OF FUNDING: 3
Baton Rouge, Louisiana 70804

STATE LEGISLATION FOR SPECIAL EDUCATION:

Mandated currently: 3 to 21

Mandated by 1985: birth to 3

MAJOR OBJECTIVES:

The SIGs primary objectives are to:

- Deliver special education services to handicapped children birth to 2 years.
- Improve methods of locating and identifying handicapped children 3 through 5 years.
- Establish an interagency model for delivery of special education and related services to handicapped children.

ACCOMPLISHMENTS DURING 1979:

The SIG sponsors a yearly conference with national experts in areas related to preschool education for the handicapped. Workshops are held quarterly throughout the state (e.g., speech, assessment). A cooperative arrangement with state universities fosters communication and training. Input is contributed to the state plan.

Available materials include preschool noncategorical manual, selected materials for severe/profound, assessment instruments, and procedures for program implementation. New materials are continually added to a 3-ring binder. Films on child search are also available.

- Number of people trained: 1500-2000 (not limited to preschool teachers)
- Sites and services stimulated: (1) five model projects, including a consortium, (2) 44 of 63 state preschool programs are monitored.

MAINE

SIG DIRECTOR: Christine B. Bartlett PHONE: 207/289-3451

STATE DIRECTOR OF
SPECIAL EDUCATION: John Kierstead PHONE: 207/289-3451

ADDRESS: MDECS YEARS OF FUNDING: 3
Division of Special Education
State House Complex #23
Augusta, Maine 04333

STATE LEGISLATION FOR SPECIAL EDUCATION:

Mandated: 5 to 20
Permissive: hearing and language impaired children under 5
Pilot legislation: 3 to 5

MAJOR OBJECTIVES:

- The major SIG objectives are to:
- Establish a statewide training network via 16 county advisory councils.
 - Conduct a statewide training needs assessment of personnel concerned with young handicapped children.
 - Provide five full days of inservice training in all 16 counties.
 - Establish a university consortium responsible for developing an undergraduate degree program in early childhood special education within the state university system.

ACCOMPLISHMENTS DURING 1979:

The project was successful in getting (1) \$100,000 continuation funding from the state legislature for six existing pilot sites, and (2) authorization for a one-year continuation of an early childhood position within the Division of Special Education. Fifteen area workshops were provided to the pilot sites in addition to two days of consultation to the Resource Center. A seventh pilot site was established to serve a 3-county rural area of the state. The SIG introduced legislation for permissive provision of services to 3- to 5-year-old handicapped children. A third-party evaluation of the first two years of SIG funding was conducted. The project established a university consortium to begin developing an undergraduate curriculum in early childhood special education.

Available project-developed materials include a parent brochure, a format for evaluating grant applications, and an evaluation handbook.

- Number of people trained: 85
- Sites and services stimulated: The SIG was responsible for funding seven projects responsible for coordinating early childhood education for the handicapped and stimulating new services. During the current funding year, the project is focusing on developing statewide inservice training via county advisory councils.

MASSACHUSETTS

SIG DIRECTOR: Ann Taylor PHONE: 617/727-5770
ASSOCIATE COMMISSIONER/
SPECIAL EDUCATION: Roger Brown PHONE: 617/727-6217
ADDRESS: Division of Special Education YEARS OF FUNDING: 4
State Department of Education
6th Floor, 31 St. James Street
Boston, Massachusetts 02116

STATE LEGISLATION FOR SPECIAL EDUCATION:

Mandated: noncategorical special education from 3 to 21
Permissive: below 3

MAJOR OBJECTIVES:

- The major SIG objectives are to:
- Implement "A Plan for Coordinated Interagency Services for Children with Special Needs in Massachusetts" at a demonstration site, with the Brockton Area Human Resources Group, Inc., serving as contracted central coordinating agency.
 - Develop methods for interagency cooperation in screening, assessment, service delivery, and financing responsibilities.
 - Conduct a comprehensive ongoing public awareness campaign through a coordinating agency that addresses normal child growth and development, advantages of early diagnosis and intervention, and available community services.
 - Provide technical assistance and inservice training to all programs and agencies which serve preschool children with special needs in the use of the early childhood network.
 - Document processes and procedures for replication of the early childhood network on a statewide basis.
 - Field test and evaluate a plan for interagency services for children birth to 6.

ACCOMPLISHMENTS DURING 1979:

The project successfully secured funding for two field test sites, carried out a third-party evaluation of each field test site, and developed an early childhood addendum to the IEP training manual.

Available SIG-developed materials include: (1) Resource Directory of Programs (by region and community), (2) Funding Manual, (3) Screening Book, (4) Screening Case Studies Book, (5) Developmental Assessment Booklet, (6) Mainstreaming through the Media (annotated bibliography of media for children).

- Sites and services stimulated: 2 field test sites

NEBRASKA

SIG DIRECTOR: Jan Thelen PHONE: 402/471-2471

STATE DIRECTOR OF SPECIAL EDUCATION: Gary Sherman PHONE: 402/471-2471

ADDRESS: Nebraska Dept. of Education
Special Education Branch
P.O. Box 94987
Lincoln, Nebraska 68509 YEARS OF FUNDING: 4

STATE LEGISLATION FOR SPECIAL EDUCATION:

Legislative Bill 889, effective July 1, 1979, requires that each local school district provide or contract for special education services to all resident handicapped children from date of diagnosis or date of notification of the resident school district to age 21.

MAJOR OBJECTIVES:

Primary SIG efforts are to:

- Facilitate the development and adoption of statewide teacher training standards for early childhood special education.
- Establish an information clearinghouse for persons seeking training.
- Provide program enrichment and technical assistance to preservice college and university programs training persons to work with young children with special needs.
- Continue the provision of short-term, specialized inservice training to meet immediate needs.
- Continue administrative activities related to the implementation of LB 889.
- Continue data gathering and maintenance activities related to the Toybrary, Parent Resource Library, and Roundhouse.

ACCOMPLISHMENTS DURING 1979:

Primary accomplishments relate to providing assistance to LEAs and other agencies in the implementation of LB 889, including the development of planning regions within the state for delivery of services. Criteria for the approval of private preschools for LEA special education contracting were adopted by the State Board of Education. Seminars and workshops for parents of special needs children were presented in an effort to assist parents to work through appropriate channels in assuming a more active role as the primary educators and advocates for their children.

These materials are available: (1) ToyBrary Catalogue, (2) ToyBrary Sound-Filmstrip, (3) ToyBrary Procedural Handbook, (4) Putting the Puzzle Together: The Education of Prekindergarten Handicapped Children in Nebraska, (5) Roundhouse, a bimonthly publication of inservice offerings, seminars, conferences, and workshops for persons serving young children from birth to 8.

- Number of people trained: 300-350
- Sites and services stimulated: 15

NEVADA

SIG DIRECTOR: Sharon Palmer PHONE: 702/386-5277

STATE DIRECTOR OF
SPECIAL EDUCATION: Frank South PHONE: 702/885-5700

ADDRESS: Nevada Dept. of Education YEARS OF FUNDING: 1
Nevada State Mail Room
Las Vegas, Nevada 89158

STATE LEGISLATION FOR SPECIAL EDUCATION:

Nevada Revised Statutes permit, but do not require, local districts to serve aurally and visually handicapped from birth and mentally handicapped from age 3.

MAJOR OBJECTIVES:

- The SIGs major objectives are to:
- Facilitate the coordination of existing services by improving interagency co-operation.
 - Develop a public awareness campaign that features current preschool services.
 - Increase the knowledge of parents in Nevada regarding early childhood development and education.
 - Develop a preschool component for Nevada's Comprehensive Personnel Preparation Plan for Handicapped Education.
 - Serve as a resource to and provide technical assistance to school districts within the state.

ACCOMPLISHMENTS DURING 1979:

In the first three months of the project a resource file of key early childhood service providers was developed. Regional interagency meetings of 30 participants were held in northern and southern Nevada to share information about programs and identify early childhood special education needs in the state. Several training workshops are planned.

Brochures, media spots, and a state early childhood directory are planned for dissemination.

- Sites and services stimulated: (1) increased interest in expanding existing programs in school districts and other agencies; (2) several day care programs have requested training for working with handicapped children.

NEW YORK

SIG DIRECTOR: Larry Gloeckler PHONE: 518/474-2251

SIG COORDINATOR: Priscilla Fullington PHONE: 518/474-2251

STATE DIRECTOR OF
SPECIAL EDUCATION: Louis Grumet PHONE: 518/474-5548

ADDRESS: New York State Dept. of Education
Bureau of Program Development
Room 1061
Office for Education of Children
with Handicapping Conditions
Albany, New York 12234

YEARS OF FUNDING: 4

STATE LEGISLATION FOR SPECIAL EDUCATION:

Mandated: 5 to 21; deaf - birth to 3

Permissive: None

Parents may petition through family court for educational services for handicapped children birth to 5.

MAJOR OBJECTIVES:

The major SIG objectives are to:

- Organize and coordinate, at state and local levels, services that are delivered to handicapped children below the age of 5.
- Provide technical assistance and support to the network of direction centers so as to match the needs of handicapped children with the services available.
- Provide inservice training to personnel working with young handicapped children.
- Develop an accredited continuing medical education course for physicians and allied health personnel entitled, "Early Identification and Referral of Handicapped Infants and Preschoolers."

ACCOMPLISHMENTS DURING 1979:

The project has established 18 early childhood direction centers designed to assist parents and professionals in matching the needs of young handicapped children with services. It also developed an interagency agreement between the Disabled Children's Program and the State Department of Education to establish an early childhood direction center in an LEA and also in a university-affiliated medical center. The SIG subcontracted for the development of a physician's training course. It also developed a relationship with regional perinatal centers and early childhood direction centers.

These SIG materials are available: (1) Agency Matrix of Services for Preschool Handicapped Children, (2) The IEP Planning Conference: A Trainer's Guide for Parent's Role in Participating in the IEP Conference, (3) Early Childhood Direction Center brochures.

- Number of people trained: 275
- Sites and services stimulated: 48

NORTH CAROLINA

SIG DIRECTOR: Carolyn Perry PHONE: 919/733-3921
SIG COORDINATOR: Mable Hardison PHONE: 919/733-3921
STATE DIRECTOR OF
SPECIAL EDUCATION: Theodore R. Drain PHONE: 919/733-3921
ADDRESS: Division for Exceptional Children YEARS OF FUNDING: 4
State Dept. of Public Instruction
Raleigh, North Carolina 27611

STATE LEGISLATION FOR SPECIAL EDUCATION:

Mandated: 5 to 17
Permissive: below 5

MAJOR OBJECTIVES:

- The major SIG objectives are to:
- Establish a pilot statewide pre-kindergarten screening program to identify unrecognized children who are in need of special services.
 - Conduct continuous inservice training programs for developmental day care, Head Start, and local education agency personnel who need technical assistance in implementing and/or upgrading services and programs for preschool handicapped children.
 - Provide coordination and programming techniques to staff in developmental day care centers across the state.
 - Develop resource files for each of the eight regional education centers, enabling parents to have access to information on resources in their immediate region to meet the needs of young handicapped children.
 - Develop procedures and practices for the transition of young handicapped children from preschool programs into public school programs.

ACCOMPLISHMENTS DURING 1979:

In addition to conducting 15 inservice training sessions, the SIG sponsored two special training sessions: (1) a workshop for preschool incentive grant personnel on program development procedures, and (2) a statewide awareness conference for local education agency, developmental day care, and Head Start personnel. Demonstration programs were established in three local education systems which will allow other school personnel to review them for possible replication. Two programmed training modules were developed in the areas of program management and IEP development.

SIG-developed materials include: (1) demonstration program materials (schedules, observation forms, evaluations), (2) programmed training modules (limited number of copies available): Getting Started: A Guide to Program Management Techniques; Assess, Plan, Teach: IEP Development for the Preschool Handicapped Child; Preschool Guidelines for Children with Special Needs; A Directory of Services for Preschool Programs and Services for Children with Special Needs.

- Number of people trained: 574
- Number of inservice training sessions: 15
- Sites and services stimulated: 22 preschool programs are now operating in LEAs.

OHIO

SIG DIRECTOR: Veronica Payer PHONE: 614/466-2650
 SIG COORDINATOR: Carol Quick PHONE: 419/666-5180
 STATE DIRECTOR OF
 SPECIAL EDUCATION: S. J. Bonham PHONE: 614/466-2650
 ADDRESS: Division of Special Education YEARS OF FUNDING: 1
 933 High Street
 Worthington, Ohio 43085

STATE LEGISLATION FOR SPECIAL EDUCATION:

Mandated: 5 to 21; diagnostic - 3 to 5
 Permissive: educational services - 3 to 5
 parent counseling - birth to 2

MAJOR OBJECTIVES:

Major SIG objectives are to:

- Develop a communication network of local school districts and other agencies providing preschool services to share information and plan for comprehensive preschool services.
- Develop inservice training modules for professional and paraprofessional early education staff that will describe essential preschool components and implementation procedures.
- Develop and disseminate materials and information for use by educators, parents, and general public to increase awareness of needs of young handicapped children.
- Establish an ongoing information retrieval system so that future planning decisions are based upon accurate data.

ACCOMPLISHMENTS DURING 1979:

The project sponsored a statewide meeting for school district personnel. It also assisted in the development of a communications network with state agencies, HCEEP projects, and private agencies.

Types of available materials include a newsletter, slide-tape presentation, and a bibliography of project-developed materials.

- Number of people trained: 100
- Sites and services stimulated: 16 regional resource centers have materials for inservice to local programs.

OKLAHOMA

SIG DIRECTOR: JoAnn Gordoni PHONE: 405/521-2312

SIG COORDINATOR: Mary Lou Acers PHONE: 405/424-1469

STATE DIRECTOR OF
SPECIAL EDUCATION: Maurice Walraven PHONE: 405/521-3361

ADDRESS: Oklahoma Dept. of Education YEARS OF FUNDING: 1
2500 North Lincoln Blvd., Suite 2-63
Oklahoma City, Oklahoma 73105

STATE LEGISLATION FOR SPECIAL EDUCATION:

Mandated: birth to 4, severely handicapped; above 4, all
Permissive: birth to 4, mild and moderate

MAJOR OBJECTIVES:

Primary SIG efforts are to:

- Establish a state decision making interagency team through the Governor's mini-cabinet on human resources.
- Review the needs for coordination of services as pinpointed by three inter-agency coordinators in high need areas.
- Implement a procedure for the coordination of services in the three regional areas.
- Draft interagency agreements by June, 1980 for field testing in additional sites in FY-81.

ACCOMPLISHMENTS DURING 1979:

The project experienced a delayed start because of postponement of presentation to state level body. The state decision making interagency team is being established through the Governor's mini-cabinet on human resources. The State Board of Education has approved the three regional areas, which are Oklahoma City metropolitan, Tulsa metropolitan, and rural southeastern Oklahoma.

At the present time, the SIG is disseminating a survey on early childhood/special education training and certification needs.

- Sites and services stimulated: An EHA-B and Early Childhood Handicapped Advisory Board review and report on the needs for services for children birth to 8. Project staff presentations, interviews, surveys and contacts have stimulated the realization of the need for coordination of services and have generated many requests for inservice training.

PUERTO RICO

SIG DIRECTOR: Awilda Torres PHONE: 809/764-8059, -0994
STATE DIRECTOR OF SPECIAL EDUCATION: Annabel Flores PHONE: 809/764-8059
ADDRESS: Department of Education YEARS OF FUNDING: 1
Box 759
Hato Rey, Puerto Rico 00919

STATE LEGISLATION FOR SPECIAL EDUCATION:

Mandated: 3 to 21
Permissive: below 3

MAJOR OBJECTIVES:

- The major SIG objectives are to:
- Organize and train an evaluation team to screen, evaluate, place, and develop IEPs for 3- to 5-year-old handicapped children on an island-wide basis.
 - Train teachers on key topics.
 - Involve parents in the assessment and educational programming process.
 - Develop a directory and a plan for disseminating information and materials.
 - Establish an island-wide materials lending library for parents and teachers.

ACCOMPLISHMENTS DURING 1979:

The SIG team includes a social worker, speech therapist, occupational therapist, psychologist, supervisor, and typist. A total of 121 children were located and evaluated in the Ponce and Caguas regions. After evaluation, 40 children were placed, and teachers and staff received training. Curriculum and dissemination materials are being printed.

- Number of people trained: 20
- Sites and services stimulated: 2 regions

SOUTH DAKOTA

SIG DIRECTOR: Sharyl R. Gottschalk PHONE: 605/773-3678

STATE DIRECTOR OF
SPECIAL EDUCATION: George R. Levin PHONE: 605/773-3678

ADDRESS: Section for Special Education YEARS OF FUNDING: 3
R. F. Kneip Office Building
Pierre, South Dakota 57501

STATE LEGISLATION FOR SPECIAL EDUCATION:

Mandated: birth to 21 for children in need of prolonged assistance (severe and profound); 3 to 21 for children in need of special assistance (mild, moderate and gifted)

MAJOR OBJECTIVES:

- The major SIG objectives are to:
- Expand child find activities through increased preschool screening efforts with maternal and child health.
 - Continue efforts in developing interagency agreements with other agencies within the state.
 - Assist in initiation of new LEA preschool programs and monitor and review existing services.
 - Revise and update South Dakota Preschool Guidelines and Rules and Procedures.
 - Provide technical assistance and inservice training services to preschool programs for handicapped children.

ACCOMPLISHMENTS DURING 1979:

In the past year, the South Dakota SIG has developed four interagency agreements at the state level. An interagency referral system has been established and implemented in the southeastern part of the state. Numerous people have received inservice in the area of early childhood/special education. New preschool handicapped programs have been initiated, while established programs have received technical assistance in continuing their programs.

Materials developed by the SIG include: (1) South Dakota Preschool Guidelines, (2) South Dakota Preschool Curriculum, (3) Parental Involvement Manual, (4) South Dakota Special Education Administrative Handbook, and (5) several brochures.

- Number of people trained: 1,805
- Sites and services stimulated: (1) new early childhood programs initiated in three school districts, (2) expansion of present early childhood programs in two school districts, (3) possibility of new early childhood programs in four cooperatives (covering 24 school districts) and one independent school district, (4) Interagency Referral System established in one area of the state.

TENNESSEE

SIG DIRECTOR: Bette J. Berry PHONE: 615/741-2851
STATE DIRECTOR OF
SPECIAL EDUCATION: Vernon L. Johnson PHONE: 615/741-2851
ADDRESS: State Dept. of Education YEARS OF FUNDING: 2
103 Cordell Hull Building
Nashville, Tennessee 37219

STATE LEGISLATION FOR SPECIAL EDUCATION:
Mandated: 4 to 21 and 3-year-old deaf children.

MAJOR OBJECTIVES:

- Major SIG objectives are to:
- Work with all agencies that provide programs and services to handicapped children so that a plan can be developed to eliminate the overlaps and fill the gaps that exist in programs and services for preschool handicapped children.
 - Complete guidelines for programs and services for preschool handicapped children.
 - Compare preschool guidelines with existing regulations to determine if changes in rules and regulations are needed.
 - Conduct a needs assessment to determine inservice training needs.
 - Provide inservice education which will include training on implementation of guidelines.
 - Provide sample materials to assist in provision of technical assistance to preschool programs by SDE district personnel.

ACCOMPLISHMENTS DURING 1979:

A draft of guidelines for early childhood/special education was developed and is currently being revised. The project also developed a directory of services and a map of the state which indicates the location and types of programs for preschool handicapped children. Statewide inservice education was provided for state and local administrators on programs for preschool handicapped children.

Project-developed materials include a directory of programs and services with a map of the state showing location of available programs; and guidelines for preschool programs, available when revision is completed.

- Number of people trained: 250
- Sites and services stimulated: 30 school systems requested and received funds for preschool programs.

VIRGIN ISLANDS

SIG DIRECTOR: Iselyne Hennesey PHONE: 809/774-4399
STATE DIRECTOR OF
SPECIAL EDUCATION: Iselyne Hennesey PHONE: 809/774-4399
ADDRESS: State Office of Special Education YEARS OF FUNDING: 1
P.O. Box 630
St. Thomas, Virgin Islands 00801

STATE LEGISLATION FOR SPECIAL EDUCATION:

Mandated: 5 to 18

Permissive: birth to 5 and 18 to 21

MAJOR OBJECTIVES:

The major efforts of the SIG are to identify needs and develop a plan for a program for preschool handicapped children including personnel training, program development, interagency coordination, communication/dissemination, administration, management, and evaluation.

ACCOMPLISHMENTS DURING 1979:

The project has completed some personnel training and has initiated communication with the Virgin Islands Department of Health, Social Welfare, Head Start, day care, and other key agencies and personnel to determine needs and plan a program.

VIRGINIA

SIG DIRECTOR: M. Jo Bunce PHONE: 804/786-2673
SIG COORDINATOR: Mary Elsesser PHONE: 804/786-2673
STATE DIRECTOR OF
SPECIAL EDUCATION: James T. Micklem PHONE: 804/786-2673
ADDRESS: Division of Special Education YEARS OF FUNDING: 1
Support Services
Department of Education
P.O. Box 60
Richmond, Virginia 23216

STATE LEGISLATION FOR SPECIAL EDUCATION:

Mandated: 2 to 21
Permissive: below 2

MAJOR OBJECTIVES:

- The objectives of the SIG are to:
- Assess the statewide training and technical assistance needs of administrators and direct service personnel of preschool handicapped programs.
 - Assess the training and technical assistance resources that are available to meet these needs.
 - Develop and implement a plan which would enhance the use of these resources as well as develop new resources.

ACCOMPLISHMENTS DURING 1979:

Respondents (n=851) to a needs assessment survey indicated these priority needs: administrators and direct service personnel need assistance in identifying and utilizing local and state services for preschool handicapped children and their parents; direct service personnel need assistance assessing and developing teaching skills in parents; administrators need assistance in developing a plan for program evaluation. A plan to address these needs includes a statewide community services directory for educators of preschool handicapped children and a workshop for direct service personnel and administrators. The workshop will address: (1) staff competencies for working with families; (2) strategies for assisting parents in fostering their own child's development; and (3) products/materials for working with parents. The final component of the plan includes a strategy to address the program evaluation needs of administrators of preschool programs for the handicapped.

Project materials available include a needs assessment index for programs serving preschool handicapped children and a procedural manual for the same.

WASHINGTON

SIG DIRECTOR: Linda Espinosa PHONE: 206/753-0317
STATE DIRECTOR OF
SPECIAL EDUCATION: Bill Hulten PHONE: 206/753-6733
ADDRESS: Division of Special Services YEARS OF FUNDING: 4
Old Capitol Building
Olympia, Washington 98504

STATE LEGISLATION FOR SPECIAL EDUCATION:

Mandated: 5 to 21
Permissive: birth to 4

MAJOR OBJECTIVES:

The Washington SIG's primary objectives are to:

- Continue the statewide system of Regional Technical Assistance Centers (RTAC) for all preschool handicapped programs in Washington State.
- Implement state guidelines for preschool programs for handicapped children.
- Continue early childhood interagency work, including the development of at least three state-level interagency agreements.
- Develop and field-test model child find procedures which are replicable.

ACCOMPLISHMENTS DURING 1979:

Twenty-six inservice workshops were held throughout the state. Three interagency agreements have been developed, between the Office of the Superintendent of Public Instruction and the (1) Division of Developmental Disabilities; (2) Administration for Children, Youth, and Families; and (3) Division of Mental Health. A child find manual and preschool guidelines were developed. Two statewide workshops were held.

These materials are available: Preschool Program Guidelines, Child Find Manual, Child Find monitoring checklist, resolution for preschool special education teacher certification standards, and an early childhood special education materials packet.

- Number of people trained: 650
- Sites and services stimulated: Eight new preschool special education programs have been initiated.

WEST VIRGINIA

SIG DIRECTOR: Keith C. Smith PHONE: 304/348-2034
STATE DIRECTOR OF
SPECIAL EDUCATION: Keith C. Smith PHONE: 304/348-2034
ADDRESS: Division of Special Education and YEARS OF FUNDING: 1
Student Support Systems
Capitol Complex
Building 6, Room B-057
Charleston, West Virginia 25305

STATE LEGISLATION FOR SPECIAL EDUCATION:

Mandated: 5 to 23
Permissive: 3 to 4

MAJOR OBJECTIVES:

Major SIG objectives are to:

- Coordinate all public and private agencies which provide services to handicapped children under 5, in order to develop a continuum of appropriate services available to all preschool handicapped children.
- Provide program models for the provision of services to handicapped children under age 5. The models will be used to increase the number of available programs and to improve the quality of programming presently available to the preschool handicapped population.
- Develop and implement personnel development activities (preservice and in-service) that assure quality and consistency in the instructional service provided to preschool handicapped children.

ACCOMPLISHMENTS DURING 1979:

The project has been involved in writing a grant to fund an early childhood education/early intervention program. The project has also sponsored a direction-planning meeting for people involved in early education for the handicapped.

WISCONSIN

SIG DIRECTOR: John Melcher PHONE: 608/266-1000

SIG COORDINATORS: Jim McCoy & Jenny Lange PHONE: 608/266-9615

STATE DIRECTOR OF SPECIAL EDUCATION: Victor Contrucci PHONE: 608/266-1649

ADDRESS: Wisconsin Dept. of Public Instruction
Division for Handicapped Children
126 Langdon Street
Madison, Wisconsin 53702

YEARS OF FUNDING: 4

STATE LEGISLATION FOR SPECIAL EDUCATION:

Mandated: 3 to 21
Permissive: birth to 3

MAJOR OBJECTIVES:

- The primary objectives of the Wisconsin SIG are to:
- Develop standards for early childhood/handicapped teacher-training programs.
 - Coordinate inservice training for 250 people.
 - Implement an intra-state technical assistance system, the Handicapped Children's Technical Assistance Model (MATCH, acronym biased in favor of the learning disabled).
 - Conduct orientation visits to 89:313 Day Service Centers serving infants and toddlers.

ACCOMPLISHMENTS DURING 1979:

The SIG conducted workshops on assessment for early childhood/handicapped teachers and psychologists, and workshops on mainstreaming for early childhood/handicapped teachers and kindergarten teachers. Several new products, among those listed below, were developed in 1979.

These materials are available from the SIG: (1) Pamphlet 9225: Why School for 3-5 Year Olds?; (2) Pamphlet 7450: A Positive Difference (explains role of physician in referral process); (3) Handbook of Exemplary Practices in Art, Music and Literature for Young Handicapped Children; (4) 10 EC/H Teacher Training Modules; (5) Out of the Nest: Instructional Strategies to Prepare Young, Exceptional Children for the Mainstream; (6) Fingerplay Booklet; (7) Formal Assessment Instruments for Exceptional Children Under Five.

- Number of people trained: 800
- Sites and services stimulated: 35 new programs brings the state total to approximately 300.

RESEARCH ON EARLY ABILITIES
OF CHILDREN WITH HANDICAPS (PROJECT REACH)

FISCAL AGENCY: University of California at Los Angeles

ADDRESS: UCLA Department of Education PHONE: 213/825-2833
405 Hilgard
Los Angeles, California 90024

PRINCIPAL INVESTIGATORS: Barbara K. Keogh & Claire B. Kopp

CONTACT PERSON: Claire B. Kopp

MAJOR OBJECTIVES:

REACH's long-term goal is to characterize competence of handicapped and at-risk children between 1 and 6 years of age. Since individual variability in competence characterizes this group of children, as it does others, it is essential to delineate the development of variability and the factors that mediate effectiveness. This is the focus of many REACH studies.

MAJOR ACTIVITIES:

In infancy studies, a comprehensive set of interrelated studies has been proposed to extend and amplify work that is underway. Two of the studies focus on sustained attention; one looks at caregiver behavior, the other at modification of child abilities. Preschool studies focus on aspects of at-risk and handicapped preschoolers in the broad areas of motivation, social development, and temperament. It is hypothesized that these domains, along with general cognitive abilities, account for a substantial amount of the variance which explains children's abilities to get along successfully in a preschool setting. Other work also continues to look at intervention programs, relating program characteristics to aspects of child progress. Program data are tied to utilization of resources and to family/child status. Documentation of child progress studies are underway. Several levels of efforts are being made to develop more powerful ways of demonstrating changes in young handicapped children. Cohort 1 for the longitudinal study is completed. Cohort 2 will be recruited starting February 1980.

ACCOMPLISHMENTS DURING 1979:

Data collection and videotape coding have been completed for a final sample of 40 nonhandicapped and 10 Down's syndrome infants on studies related to sustained attention and clustering. The development of a Teachability Scale has been completed. Utilization of this scale in the data collection of teacher's perceptions of teachable pupil attributes is continuing. Forty parent interviews on the utilization of resources and family/child status have been completed. Work on data reduction for computer analysis is in preparation. Our study of the characteristics of Program Foundations and Specification of intervention components has been completed and is in the final stages of writing. The Program Parameters Inventory, having undergone several revisions and extensive piloting, is now in usable form. The first cohort of 20 children has entered into our longitudinal project.

KANSAS RESEARCH INSTITUTE
FOR THE EARLY CHILDHOOD EDUCATION OF THE HANDICAPPED
(EARLY CHILDHOOD INSTITUTE)

FISCAL AGENCY: University of Kansas

ADDRESS: The Institute is a collaborative effort of two departments:

Department of Human Development
130 Haworth Hall
University of Kansas
Lawrence, Kansas 66045
PHONE: 913/864-4840

Department of Special Education
377 Haworth Hall
University of Kansas
Lawrence, Kansas 66045
PHONE: 913/864-4954

PRINCIPAL INVESTIGATORS: Judith M. LeBlanc & Edward L. Meyen

COORDINATORS: Ann Rogers-Warren, Research Coordinator; Carol A. Foster, Associate Research Coordinator; Barbara Gentry, Coordinator of Development

MAJOR OBJECTIVES:

The major emphasis of the ECI is to develop or improve methods of identifying and intervening with children at risk for a handicapping condition. The Institute's research is united by a common question: Why do some children develop successfully and others do not? Researchers are seeking to identify (1) what characteristics or patterns of behavior in a child might serve as signals that the child needs intervention, (2) how the child's environment affects his or her development, and (3) how procedures for documenting and assessing the child's progress can be developed. In addition, the Institute is integrating the findings from all the studies.

MAJOR ACTIVITIES:

Four areas of research are being conducted by the Early Childhood Institute:

1. Developmental Guides to Intervention--Developmental and environmental correlates of receptive language in the first year of life (Horowitz).
 - Instrument procedures sensitive to small increments in sensory/motor acquisition for normal and severely handicapped infants and young children (Guess and Rues).
2. Ecological Guides to Intervention--Child-family interactions associated with the etiology and remediation of family dysfunction (L. Embry).
 - Child-child interaction, including the social variables affecting the play behaviors of handicapped and nonhandicapped children (Peterson).
 - Development of social skills in handicapped preschool children (Cooper).
 - Child-teacher interactions, their patterns, content, and modification (Allen).
 - Child-setting interactions, including the transition from therapeutic to normal classrooms (Baer, Rowbury, and D. Embry).
 - Strategies used by mothers of handicapped, at-risk, and normal children to teach language (Rogers-Warren).
3. Assessment Guides to Intervention
 - Assessment-guided intervention based on a discrimination learning model (Etel).
 - Role of instructional variables in identifying, prescribing, and implementing optimal teacher procedures (LeBlanc).

4. Integrated Research

- Relationships among eco-behavioral and demographic measures obtained by Institute investigators (Foster).

ACCOMPLISHMENTS DURING 1979:

- Observational procedures have been developed for the following: quantitative measurement of sensory/motor acquisition, mother-child verbal interactions, interactions between handicapped and nonhandicapped preschool children, observing parental teaching skills, and communication interaction between mothers and infants in play situations.
- Longitudinal studies are being conducted in the following areas: receptive language in infants, parent-child interactions in the home, sensory/motor development in SMH and normal infants and children, and verbal interactions between mothers and their children.
- Presentations have been made at professional conferences on the following topics: group parent training, receptive language in infants, language generalization, social interaction of normal and handicapped children, transition and follow-up techniques for children entering public school from a special classroom, errorless learning procedures, assessment of at-risk and handicapped infants, and teaching techniques for increasing positive social interactions of disruptive children.

RESOURCES:

- Training and/or workshops on neonatal assessment, designing effective parent programs, academic programming for handicapped preschool children, and language remediation for preschool children.
- Comprehensive literature reviews on the following topics: receptive language of infants, social variables affecting early development, physical and ecological variables, direct instructional procedures, design criteria for instructional materials, learning assessment, instructional control variables, dissemination of research findings, infant operant conditioning, and motor development of severely and multiply handicapped children.
- Series of working-paper publications (write for complete list and prices).
- Consultative services on child management (individual and group).
- Observational codes (classroom and home-based) developed at the Institute.
- Strategies for the management of research data.
- Nontechnical articles describing various programs and research at the Institute (write for complete list and prices).
- Practical paper series.
- Bibliographies.

Specific information on products and services is available from the Institute.

INSTITUTE FOR THE STUDY OF EXCEPTIONAL CHILDREN

FISCAL AGENCY: Educational Testing Service (ETS)

ADDRESS: The Institute is a collaborative effort of two research-service organizations:

Infant Laboratory of ETS
Princeton, New Jersey 08541
PHONE: 609/921-9000, ext. 2559

Roosevelt Hospital
Department of Pediatrics
428 West 59th Street
New York, New York 10019

DIRECTOR/COORDINATORS: Michael Lewis, Director of Institute

Jeanne Brooks-Gunn, Associate Director/Coordinator of Research Unit; Nathan Fox, Coordinator of Detection Unit; Richard Brinker, Coordinator of Intervention Unit; Louis Z. Cooper, Chairman of Pediatrics Department at Roosevelt Hospital

MAJOR OBJECTIVES:

The Institute is designed to meet the growing need for productive and effective solutions to the problems of handicapped and at-risk children. It consists of four interactive units: detection, research, intervention and evaluation, and products and delivery. The major goals of the Institute are to:

- Develop more effective techniques for the early identification of children at risk for developmental dysfunction.
- Design broader and more sensitive assessment tools to be used with known handicapped children.
- Collect a body of information on the development of normal, handicapped, and at-risk infant populations.
- Develop more effective methods of intervention for handicapped infants.
- Carry out a systematic evaluation of the intervention techniques developed.
- Measure the relationship between the handicapped infant's development and the child's larger environment.
- Disseminate information as well as educational and intervention techniques developed at the Institute.

MAJOR ACTIVITIES:

- Longitudinal study of low-birth-weight infants to detect those at risk (Roosevelt Hospital).
- Completion of data gathering for Competency Assessment Profile.
- Development of intervention programs and curricula around process ("Learning to Learn") skills for parents and teachers.
- Development of curriculum modules based upon Competency Assessment Profile.
- Development and conduct of several small scale basic research studies on the cognitive and social development of handicapped infants.
- Training of predoctoral and postdoctoral students.
- Design and development of the Competency Assessment Profile as well as procedures for its use.
- Application of research knowledge about normal infant development to handicapped infants.
- Collection of information concerning the socioemotional, perceptual-cognitive and linguistic functioning of handicapped infants.

ACCOMPLISHMENTS DURING 1979:

- Completion of data collection for Competency Assessment Profile project and preliminary data analysis.
- Completion of field testing of the Competency Assessment Profile battery.
- Analysis of data collected in order to determine the interrelationship of skills as a function of both age and diagnostic category.
- Dissemination of information to professionals in the field.
- Beginning of data-gathering on neonates for Identification Project.
- Design of contingency devices to be used as part of "Learning to Learn" Curriculum within Intervention Unit.
- Development and initial pretesting of measures/devices to be used for Contingency Research Project.
- Planning and implementation of research studies by predoctoral and post-doctoral students.
- Participation in several inter-Institute meetings which focused on sharing of plans and findings among the Institutes.
- Participation in and presentations at several special education conferences and meetings.

RESOURCES:

"Programs and Projects: Institute for the Study of Exceptional Children" is available from Dr. Michael Lewis or Dr. Jeanne Brooks-Gunn at the Infant Laboratory of ETS.

CAROLINA INSTITUTE FOR RESEARCH
ON EARLY EDUCATION FOR THE HANDICAPPED (CIREEH)

FISCAL AGENCY: Frank Porter Graham Child Development Center

ADDRESS: Frank Porter Graham Center PHONE: 919/966-4121
Highway 54, 071 A
Chapel Hill, North Carolina 27514

PRINCIPAL INVESTIGATOR: James Gallagher

ASSISTANT DIRECTORS/COORDINATOR: Craig Ramey & Rune Simeonsson, As-
sistant Directors; Jean Gowen, Coordinator

MAJOR OBJECTIVES:

- The Institute's major objectives are to:
- Develop a curriculum for severely and multiply handicapped infants, developmental ages birth to 1 year.
 - Study the effectiveness of two types of intervention programs for children at risk for socially caused mental retardation.
 - Develop new approaches for assessing the developmental progress of moderately, severely, and multiply handicapped children.
 - Further understand how to work with the families of handicapped and at-risk children to facilitate the education of their children. This goal will be accomplished by carrying out research projects which will attempt to:
(1) clarify both theoretical and operational definitions of preschool mainstreaming; (2) identify characteristics of mainstreamed preschool children and examine parental perspectives on programs; (3) study parent involvement with preschool programs; (4) examine the network of family relationships that influence both the adaptive behavior of the high-risk and handicapped child as well as the child's and family's relationships with education programs; and (5) identify characteristics of successful parents of young handicapped children and the support systems used by these families.

MAJOR ACTIVITIES:

During 1979, CIREEH continued to study the education of young handicapped children and children at risk for mild handicaps. Efforts included intervention and descriptive studies and the development of curriculum materials and assessment techniques.

The Carolina Approach to Responsive Education (Project CARE) is comparing the effects of two types of early education on the development of children at risk for mild mental retardation due to environmental factors. Families have been randomly assigned to a home education group, a home education plus day care group, and a control group. Children enter the program at approximately 3 months of age. The day care group attends a full day, five-day-a-week developmental program. Parent education is provided by a home visitor in biweekly visits. All three groups receive nutritional supplements. Mother-child interaction and child progress are assessed on a regular basis.

The Curriculum Development project is developing and testing a curriculum for severely and multiply handicapped infants covering developmental ages birth to 3 years.

The CIREEH descriptive studies are examining a wide range of factors which are thought to affect the early education of handicapped children. Research topics include: (1) parent involvement in preschool programs for handicapped children; (2) characteristics of families of children at risk for socially caused mental retardation; (3) the roles and characteristics of parents in mainstreamed programs; (4) the assessment of moderately and severely handicapped children; and (5) the relationship of family characteristics to adaptive behavior in the classroom.

Instruments and techniques for assessing a number of child and family characteristics are being developed.

ACCOMPLISHMENTS DURING 1979:

The curriculum for severely and multiply handicapped infants, developmental ages birth to 1 year, has been pilot-tested and is presently being field-tested at developmental centers. This curriculum is presently available in pre-publication draft form for research validation.

An experimental form of the Carolina Record of Infant Behavior (CRIB) for assessing and predicting the development of severely handicapped infants has been completed and pilot-tested. Experimental forms have been developed to assess: (1) the social assets of handicapped children; (2) parental concepts about infant development; (3) parental information needs; (4) family roles; and (5) the cognitive development of severely and multiply handicapped children. Also available are experimental forms of measures designed to survey parent involvement in preschool programs, and the characteristics of mainstreamed programs.

Interim research reports have been prepared on preliminary results from the studies of (1) parent involvement in preschool programs for handicapped children, (2) mother-child interaction, (3) characteristics of mainstreamed preschool programs, (4) sources of support for parents of handicapped children, and (5) the relationship between characteristics of families and classroom behavior.

RESOURCES:

- Carolina Curriculum for Handicapped Infants
- Carolina Record of Infant Behavior: Experimental Form
- Technical report on the Carolina Institute for Research on Early Education for the Handicapped
- CIREEH Abstracts: List of publications available from the Carolina Institute for Research on Early Education for the Handicapped

TECHNICAL ASSISTANCE DEVELOPMENT SYSTEM (TADS)

ADMINISTRATIVE/FISCAL AGENCY: Frank Porter Graham Child Development Center, University of North Carolina--Chapel Hill

ADDRESS: 500 NCNB Plaza PHONE: 919/967-9221
Chapel Hill, North Carolina 27514

DIRECTOR: Pascal Trohanis

SERVICES AVAILABLE:

TADS provides technical assistance to the HCEEP Demonstration and State Implementation Grant projects in the states and territories east of the Mississippi River, with the exception of Illinois, Mississippi, and Wisconsin. In FY 1979-80, TADS serves 71 Demonstration projects and 14 State Implementation Grants (SIGs). TADS also maintains contact with and provides general information to Outreach projects and the Early Childhood Research Institutes within the same geographic region.

TADS coordinates its technical assistance services through a central staff located in Chapel Hill, North Carolina, drawing upon consultants and other resources throughout the country to meet the needs of its client programs. Each program's needs are assessed jointly by the program staff and TADS, and plans for services designed specifically to address those needs are also agreed upon by the program and TADS. Technical assistance services for demonstration projects may address needs in areas such as program planning, evaluation, curriculum development and services to children, parent involvement, staff development, demonstration and dissemination, continuation funding, and project administration. For SIGs, technical assistance is available in the areas of program development and management, evaluation, personnel training, interagency cooperation and coordination, and communication/dissemination.

PRODUCTS AVAILABLE:

Over the last eight years TADS had developed many publications as a part of its technical assistance services, including books, monographs, bibliographies and manuals. A complete product listing can be obtained from TADS. TADS' most recent publications include: Planning for Evaluation: A Resource Book for Programs for Preschool Handicapped Children--Documentation (1978); Language Intervention: A Sampling of Selected Programs for Severe, Moderate, and Mild Impairments (1978); Product Listing: An Annotated Bibliography of Materials Developed by Eastern HCEEP Programs (1978); Infant Education: A Guide for Helping Handicapped Children in the First Three Years (1977); Early Education in Spanish-Speaking Communities (1978); Social-Emotional Development: The Preschooler (1978); and Perspectives on Measurement: A Collection of Readings for Educators of Young Handicapped Children (1979). TADS in collaboration with WESTAR produced Points of View: A State Implementation Grant Conference Proceedings Document (1978); the 1977-78, 1978-79 and 1979-80 editions of the HCEEP Overview and Directory; Issues of Common Concern: A Report of the HCEEP Minority Leadership Workshop (1979); and a slide program aimed at state decision makers, An Update on Early Education for Young Exceptional Children.

WESTERN STATES TECHNICAL ASSISTANCE RESOURCE (WESTAR)

FISCAL AGENCY: University of Washington

ADDRESS: 215 University District Building PHONE: 206/543-8565
1107 N.E. 45th, JD-06
Seattle, Washington 98105

PRINCIPAL INVESTIGATORS: Norris G. Haring, University of Washington;
H. D. (Bud) Fredericks, Teaching Research; James Galloway, National
Association of State Directors of Special Education

PROJECT COORDINATOR: Joan Karp (Acting)

SERVICES AVAILABLE:

WESTAR, a consortium of the University of Washington, Teaching Research Division of the Oregon State System of Higher Education, and the National Association of State Directors of Special Education, provides technical assistance to HCEEP Demonstration and State Implementation Grant projects in the states and territories west of the Mississippi River plus Illinois, Mississippi, and Wisconsin. In addition, information and liaison services are provided to Outreach projects and Early Childhood Research Institutes in the same geographic region. In 1979-80, WESTAR serves 56 Demonstration projects and 12 SIGs.

Technical assistance is provided to demonstration projects in the areas of services for children, services for parents, staff development, demonstration/dissemination, administration, and evaluation. Technical assistance to SIG projects is provided in the areas of program development and management, personnel training, interagency cooperation, communication/dissemination, and evaluation. Services may be provided on-site by WESTAR staff or consultants; at one of WESTAR's sites (UW, TR, NASDSE); at another project site; at topical conferences and workshops; and with printed resource information. Prior to the delivery of technical assistance, an individual project needs assessment is conducted either on site or via telephone. Subsequently, a technical assistance agreement is designed, agreed upon, and signed by the individual project and WESTAR.

PRODUCTS AVAILABLE:

WESTAR has developed or assisted in the development of several products. All products are disseminated to projects within the HCEEP network. These include the WESTAR Newsletter, a quarterly publication; Ongoing Data Collection in the Classroom (1978); A Communicators' Handbook (1978); Parents as Teachers of Their Handicapped Children: An Annotated Bibliography (1979); Infant Assessment: Issues and Applications (1979). A number of series papers are also available, including Early Childhood in the Public Schools (1979); Parent Behavior Progression: Issues Concerning Its Use (1979); Individualizing Parent Involvement (1979); Creating Audiovisual Materials: A Selected Bibliography (1980); and two papers dealing with continuation funding. Also, WESTAR has, in cooperation with TADS, produced Points of View: A State Implementation Grant Conference Proceedings Document (1978); the 1977-78, 1978-79, and 1979-80 editions of the HCEEP Overview and Directory; Issues of Common Concern, a report of the 1979 HCEEP Minority Leadership Workshop; and a slide-tape presentation entitled An Update on Early Education for Young Exceptional Children.

HCEEP Project Listing

This list includes all HCEEP projects funded by BEH during 1979-80--demonstration projects, outreach projects, state implementation grant recipients, early childhood research institutes, and technical assistance centers. Within each component, projects are listed alphabetically by state, city, and project name. Identification numbers have been assigned to all projects for the purposes of accessing abstracts and using the index.

DEMONSTRATION PROJECTS

- | | |
|---|--|
| <p>001 ALABAMA, HUNTSVILLE
TARESA Handicapped Children's Early Education Program</p> <p>002 ALASKA, FAIRBANKS
Project TEACH</p> <p>003 ARIZONA, SCOTTSDALE
Project TAKE-OFF</p> <p>004 ARIZONA, TEMPE
Early Childhood Education for the Severely/Multiply Handicapped (ECE-SMH Center)</p> <p>005 ARIZONA, TEMPE
Education Center for Hearing Impaired Infants, Preschool Children, and Their Parents</p> <p>006 CALIFORNIA, FAIRFIELD
Program for Unserved Handicapped Children in Solano County</p> <p>007 CALIFORNIA, LOS ANGELES
Infant/Parent Education Project</p> <p>008 CALIFORNIA, LOS ANGELES
UCLA Intervention Program</p> <p>009 CALIFORNIA, MERCED
Infant "CARE" Program</p> <p>010 CALIFORNIA, OAKLAND
Parent-Infant Project</p> <p>011 CALIFORNIA, RICHMOND
Full Potential Program</p> <p>012 CALIFORNIA, ROHNERT PARK
Pediatric Intervention Program</p> <p>013 CALIFORNIA, SACRAMENTO
Preschool/Primary Criterion Teaching/Parent Training Project</p> | <p>014 CALIFORNIA, SAN FRANCISCO
San Francisco Infant Program</p> <p>015 CALIFORNIA, SAN FRANCISCO
Shine Family Day Care Project</p> <p>016 CALIFORNIA, SAN JOSE
Preschool Demonstration Project</p> <p>017 COLORADO, ALAMOSA
Computers to Aid and Teach Children with Handicaps (Project CATCH)</p> <p>018 COLORADO, BOULDER
Parent Resource for Infant Development and Enrichment (PRIDE Program)</p> <p>019 COLORADO, BRIGHTON
Brighton Early Education Project (BEEP)</p> <p>020 COLORADO, DENVER
Music-Oriented Intervention Program</p> <p>021 COLORADO, FT. COLLINS
Model Program for Perceptually and Linguistically Handicapped Preschool Children</p> <p>022 COLORADO, GRAND JUNCTION
Junction Early Education Programs (JEEPS)</p> <p>023 CONNECTICUT, BRIDGEPORT
Early Childhood Psycho-Educational Intervention Program</p> <p>024 CONNECTICUT, BRIDGEPORT
Mainstreaming and Rehabilitating Children with Handicaps (MARCH)</p> <p>025 CONNECTICUT, MANSFIELD DEPOT
Project Interface</p> <p>026 CONNECTICUT, PLAINVILLE
Learning about Developmental Delays and Early Remediation (LADDER)</p> |
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- 027 D.C., WASHINGTON
Early Intervention for Premature Infants and Their Adolescent Mothers
- 028 D.C., WASHINGTON
Handicapped Infant Intervention Project (HIIP)
- 029 D.C., WASHINGTON
IMPACT: Parent Training and Early Education Program
- 030 D.C., WASHINGTON
Living State Improvisational Theatre Demonstration Project for Orthopedically Handicapped Children Ages Three to Eight
- 031 D.C., WASHINGTON
Project Upstart: Developmental Preschool Education for the Severely/Profoundly Handicapped
- 032 D.C., WASHINGTON
Therapeutic Educational Day Care for Infants (TEDI)
- 033 FLORIDA, MIAMI
Comprehensive Care to the High Risk/Handicapped Newborn
- 034 FLORIDA, ORLANDO
Echo-Parent/Infant Education Project
- 035 GEORGIA, ATLANTA
Family Intervention Project
- 036 GEORGIA, DOUGLASVILLE
Preschool Readiness Education Program (Project PREP)
- 037 GEORGIA, FORT VALLEY
Demonstration Project for Preschool Handicapped Children
- 038 GEORGIA, OCHLOCKNEE
Child-Family-Community (C-F-C)
- 039 IDAHO, MOSCOW
Educational Services for Handicapped Infants and Children: A Rural Model
- 040 ILLINOIS, CHICAGO
A Model Program for Hearing-Impaired Infants Providing Medical, Academic, and Psychological Services (HI-MAPS)
- 041 ILLINOIS, KARNAK
Little Egypt Early Childhood Program (Project LEEP)
- 042 ILLINOIS, MAYWOOD
Pre-Start: A Family-Focused Model of Services for High-Risk Infants
- 043 ILLINOIS, WEST CHICAGO
Transitional Resource Addressing Children's Early Education (Project TRACE)
- 044 INDIANA, BLOOMINGTON
Monroe County Multicategorical Model Preschool
- 045 KANSAS, KANSAS CITY
A Transdisciplinary Approach to the Evaluation of Severely/Multiply Handicapped Preschool Children
- 046 KENTUCKY, LEXINGTON
Eastern Kentucky Coalition for the Handicapped
- 047 KENTUCKY, LOUISVILLE
Louisville School for Autistic Children Demonstration Preschool Project
- 048 KENTUCKY, MURRAY
Project for Early Education of Exceptional Children (PEEEEC)
- 049 KENTUCKY, OWENSBORO
Identification and Management of Young Hearing Impaired Children
- 050 LOUISIANA, LAFAYETTE
USL Parent-Child Center
- 051 LOUISIANA, MONROE
Ouachita Parish Early Childhood Project for the Handicapped
- 052 LOUISIANA, NEW ORLEANS
Neurology Children's Center Infant Development Program
- 053 LOUISIANA, NEW ORLEANS
Orleans Model for Preschool Handicapped
- 054 MARYLAND, BALTIMORE
Early Educational Intervention and Responsible Parenting Program
- 055 MARYLAND, ROCKVILLE
Early Education Project (EEP)
- 056 MASSACHUSETTS, BOSTON
Cognitive Developmental Intervention with Preschool Disordered Children
- 057 MASSACHUSETTS, GREENFIELD
Side by Side
- 058 MASSACHUSETTS, NORTHAMPTON
Rural Early Assistance to Children (REACH)
- 059 MICHIGAN, DETROIT
Detroit's Preschool Pupil/Parent/Professional Readiness Project
- 060 MICHIGAN, PLYMOUTH
Infant and Preschool Special Education Program (IPSEP)
- 061 MICHIGAN, WESTLAND
The Early Intervention Program

- 062 MINNESOTA, ST. PAUL
Project ENFOLD
- 063 MISSISSIPPI, COLUMBUS
Resource Utilization Through Regional
Agency Leadership (Project RURAL)
- 064 MISSISSIPPI, MERIDIAN
Sequential Training Experiences in the
Psychomotor Domain (Project STEP)
- 065 MISSOURI, COLUMBIA
Early Intervention Program
- 066 MISSOURI, SPRINGFIELD
Comprehensive Services for Rural
Handicapped Young Children
- 067 MISSOURI, ST. LOUIS
Project IMPACT
- 068 MONTANA, BILLINGS
Preschool Services for Handicapped
Children in Rural Areas (Project Sun-
rise)
- 069 NEBRASKA, HASTINGS
Seek Out and Serve (S.O.S.)
- 070 NEW JERSEY, CAMDEN
Community Resources in the Education
of Exceptional Preschoolers (CREEP)
- 071 NEW JERSEY, GLASSBORO
Preschool Supermarket
- 072 NEW JERSEY, MONTCLAIR
Cognitive Linguistic Intervention Pro-
gram (CLIP)
- 073 NEW MEXICO, ALBUQUERQUE
Albuquerque Special Preschool Integra-
tion Project
- 074 NEW MEXICO, PUEBLO OF ACOMA
Acoma Early Intervention Project
- 075 NEW YORK, AMSTERDAM
Tecler Diagnostic Center Birth to Six
Program for Handicapped Children
- 076 NEW YORK, BRONX
Developmental Infant Program in Hospi-
tal and Home (DIPHH)
- 077 NEW YORK, BRONX
Infant and Toddler Learning Program
- 078 NEW YORK, BUFFALO
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- 079 NEW YORK, CANTON
Early Intervention - A Rural Based
Demonstration Project
- 080 NEW YORK, ELMIRA
Elmira Mobile Resource Team
- 081 NEW YORK, FLUSHING
Hospital Educational Liaison Program
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- 082 NEW YORK, JAMESTOWN
Parent Involvement Program for Infants
- 083 NEW YORK, NEW YORK
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dren with Handicaps in a Mainstreaming
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- 084 NEW YORK, NEW YORK
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- 085 NEW YORK, YORKTOWN HEIGHTS
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- 086 NORTH CAROLINA, BOONE
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- 087 NORTH CAROLINA, GREENSBORO
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- 088 NORTH DAKOTA, BISMARCK
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with Special Needs
- 089 OHIO, AKRON
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Their Families
- 090 OHIO, CINCINNATI
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ject
- 091 OHIO, COLUMBUS
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Pediatric Residents in Handicapping
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- 092 OHIO, COLUMBUS
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- 093 OHIO, McARTHUR
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- 094 OHIO, YOUNGSTOWN
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- 095 OKLAHOMA, TULSA
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- 096 OREGON, EUGENE
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- 097 OREGON, PORTLAND
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- 098 PENNSYLVANIA, ERIE
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 - 099 PENNSYLVANIA, NORRISTOWN
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 - 100 PENNSYLVANIA, PITTSBURGH
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 - 101 PENNSYLVANIA, SCRANTON
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 - 102 PENNSYLVANIA, YEADON
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 - 103 PUERTO RICO, HATO REY
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 - 104 RHODE ISLAND, CHEPACHET
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 - 105 RHODE ISLAND, PROVIDENCE
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 - 106 SOUTH CAROLINA, COLUMBIA
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 - 107 SOUTH CAROLINA, LADSON
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 - 108 TENNESSEE, COLUMBIA
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 - 109 TENNESSEE, MEMPHIS
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 - 110 TENNESSEE, NASHVILLE
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 - 111 TEXAS, AUSTIN
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 - 112 TEXAS, BROWNSVILLE
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 - 113 TEXAS, FORT WORTH
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 - 114 TEXAS, HOUSTON
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 - 115 TEXAS, LUBBOCK
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 - 116 TEXAS, SAN ANTONIO
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 - 117 TEXAS, SILSBEE
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 - 118 UTAH, SALT LAKE CITY
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 - 119 VERMONT, RUTLAND
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 - 120 VIRGINIA, CHESAPEAKE
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 - 121 VIRGINIA, RICHMOND
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 - 122 VIRGINIA, SPRINGFIELD
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 - 123 WASHINGTON, EVERETT
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 - 124 WASHINGTON, FERNDALE
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 - 125 WASHINGTON, SPOKANE
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 - 126 WEST VIRGINIA, MORGANTOWN
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 - 127 WEST VIRGINIA, UNION
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 - 129 ARIZONA, TUCSON
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 - 130 CALIFORNIA, LOS ANGELES
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 - 131 CALIFORNIA, POMONA
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 - 132 CALIFORNIA, SAN DIEGO
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 - 133 COLORADO, BOULDER
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- 134 GEORGIA, ATHENS
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apy Model
- 135 ILLINOIS, CHAMPAIGN
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- 136 ILLINOIS, CHAMPAIGN
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- 137 ILLINOIS, MACOMB
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- 138 ILLINOIS, PEORIA
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- 139 ILLINOIS, ROCKFORD
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- 140 INDIANA, BLOOMINGTON
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- 141 INDIANA, MUNCIE
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- 142 LOUISIANA, RUSTON
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- 143 MAINE, CUMBERLAND
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- 144 MARYLAND, BALTIMORE
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- 145 MASSACHUSETTS, DEDHAM
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- 146 MASSACHUSETTS, MEDFORD
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- 147 MASSACHUSETTS, QUINCY
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ject
- 150 MINNESOTA, ST. PAUL
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- 151 MISSISSIPPI, JACKSON
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- 152 MISSISSIPPI, OXFORD
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- 153 MISSOURI, ST. LOUIS
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- 154 NORTH CAROLINA, CHAPEL HILL
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- 155 NORTH CAROLINA, COLERAIN
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- 156 OHIO, KENT
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- 157 OREGON, BEAVERTON
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Model)
- 158 OREGON, MONMOUTH
Teaching Research Data-Based Class-
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- 159 OREGON, PORTLAND
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Handicapped Children
- 160 PENNSYLVANIA, READING
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- 161 PENNSYLVANIA, UNIVERSITY PARK
Handicapped Infants Comprehensive
Outreach Model Program (HICOMP)
- 162 RHODE ISLAND, FOSTER
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- 163 TENNESSEE, NASHVILLE
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- 164 TENNESSEE, NASHVILLE
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- 165 TENNESSEE, TAZEVELL
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- 166 TEXAS, DALLAS
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- 167 TEXAS, LUBBOCK
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Two (DEBT)--Outreach
- 168 UTAH, LOGAN
Multi-Agency Preschool Outreach Project
- 169 UTAH, LOGAN
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- 170 VIRGINIA, CHARLOTTESVILLE
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- 171 VIRGINIA, LIGHTFOOT
Child Development Resources Outreach
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- 172 VIRGINIA, NORFOLK
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- 173 WASHINGTON, SEATTLE
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- 174 WISCONSIN, MILWAUKEE
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- 175 WISCONSIN, PORTAGE
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- 176 WYOMING, LARAMIE
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- 178 ALASKA, ANCHORAGE
- 179 CALIFORNIA, SACRAMENTO
- 180 COLORADO, DENVER
- 181 CONNECTICUT, HARTFORD
- 182 GEORGIA, ATLANTA
- 183 ILLINOIS, SPRINGFIELD
- 184 INDIANA, INDIANAPOLIS
- 185 KANSAS, TOPEKA
- 186 LOUISIANA, BATON ROUGE
- 187 MAINE, AUGUSTA
- 188 MASSACHUSETTS, BOSTON
- 189 NEBRASKA, LINCOLN
- 190 NEVADA, LAS VEGAS
- 191 NEW YORK, ALBANY
- 192 NORTH CAROLINA, RALEIGH
- 193 OHIO, WORTHINGTON
- 194 OKLAHOMA, OKLAHOMA CITY

- 195 PUERTO RICO, HATO REY
- 196 SOUTH DAKOTA, PIERRE
- 197 TENNESSEE, NASHVILLE
- 198 VIRGIN ISLANDS, ST. THOMAS
- 199 VIRGINIA, RICHMOND
- 200 WASHINGTON, OLYMPIA
- 201 WEST VIRGINIA, CHARLESTON
- 202 WISCONSIN, MADISON

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- 203 CALIFORNIA, LOS ANGELES
Research on Early Abilities of Children with Handicaps (Project REACH)
- 204 KANSAS, LAWRENCE
Kansas Research Institute for the Early Childhood Education of the Handicapped (Early Childhood Institute)
- 205 NEW JERSEY, PRINCETON
Institute for the Study of Exceptional Children
- 206 NORTH CAROLINA, CHAPEL HILL
Carolina Institute for Research on Early Education for the Handicapped (CIREEH)

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- 208 WASHINGTON, SEATTLE
Western States Technical Assistance Resource (WESTAR)

Index

The index provides a key to specific demographic and operating information about HCEEP projects. Because the projects were surveyed for the data, their abstracts may or may not also mention the information. Where they do not, additional details can be obtained by contacting projects individually.

In the index, each descriptor is followed by a listing of ID numbers for projects associated with it. For example, demonstration projects that report using the Alpern and Boll Developmental Profile as an assessment instrument are listed by their ID numbers after the instrument name under the subheading "Child Assessment Measures."

These categories are included in the index:

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Note. The instruments listed here were named by two or more demonstration projects. The category "project-developed instrument" indicates the specific response "project-developed instrument" with no actual name provided. The "other" category includes those instruments mentioned by a single project or the response "other." Thus, the "other" category may also include project-developed instruments.

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Note. The curricula listed here were named by two or more projects. The category "project-developed curriculum" includes the specific response "project-developed curriculum," with no actual name provided. The "other" category includes those curricula mentioned by name

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